



## FIJLKAM TRAINING CAMP MAY 2021

### ACCOMMODATION FORM

<b>NAME OF CLUB/NATION</b>		
<b>CONTACT PERSON</b>	<b>E MAIL</b>	<b>PHONE NUMBER</b>

RESERVATION								
	SURNAME	NAME	SEX	ARRIVAL DATE	DEPARTURE DATE	ROOM	EXIT PCR TEST NEEDED (Y/N)	TRANSFER NEEDED (Y/N)
1								
2								
3								
4								
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# FIJKAM TRAINING CAMP MAY 2021



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## FIJLKAM TRAINING CAMP MAY 2021

### TRAVEL FORM (to be filled in only if transfer needed)

HEAD OF THE DELEGATION IN TRAVEL		SURNAME:				NAME:		EMERGENCY MOBILE NUMBER:				E-MAIL:		
		ARRIVAL						DEPARTURE						
N°	ARRIVAL BY	DATE OF ARRIVAL	TIME OF ARRIVAL	AT	FROM	N°OF FLIGHT OR TRAIN	N° OF PAX	DEPARTUR E BY	DATE OF DEPARTUR E	TIME OF DEPARTUR E	FROM	TO	N°OF FLIGHT OR TRAIN	N°OF PAX
1														
2														
3														
5														
6														