



Audi



ENTRY FORM

Name	Categorie	Date of born	Nationality	Package	T-shirt size

HOTEL RESERVATION FORM

Name	Arrival Date	Departure Date	Sharing with....

PLEASE RETURN THIS FORM BY FAX OR E-MAIL TO ORGANIZER BEFORE

DEAD LINE 31 MAY 2008!!!

Fax: +36-62-439-451

e-mail: szeged@squashclub.hu



TRAVEL DETAILS

Name _____ Country _____
Address _____ City _____
Email _____ Telephone _____

Arrival details:

Name	Arrival date	Arrival time	Arrival place	Flight number

Departure details:

Name	Departure date	Departure time	Departure place	Flight number

PLEASE RETURN THIS FORM BY FAX OR E-MAIL TO ORGANIZER BEFORE

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