

ENTRY FORM

for 8th OLD-PRAGUE HAM 2017

to be sent ASAP to the Event's Official Address:

prague-ham@estec.cz

8TH Old-Prague Ham International Rugby Veteran Event

June 9 - 11, 2017		-					
All grey fields to be filled in. Please accept the entry of the hereir	nafter team for:						
NAME OF THE CLUB / TEAM / GR	OUP						
ADDRESS							
TOWN, COUNTRY							
TEAM MANAGER'S NAME							
ADDRESS							
TOWN, COUNTRY							
E-MAIL							
CELLULAR (MOBILE) TEL. NUMB	ER						
AGE CATEGORY:	GOLDEN (35+):		PLATIN	UM (50+):			
TOTAL EXPECTED NUMBER OF F	PERSONS						
(to be specified by names till March							
EXPECTED ARRIVAL DATE							
by: flight Nr. (if by plane), or by bus or by other transport (to be specified till March 31, 2017)							
EXPECTED DEPARTURE DATE							
PARTICIPATION PACKAGE REQU	EST IN HOTEL :						
TOTAL NUMBER OF NIGHTS:	nights						
	in singles for	Persons x		EUR/pers./night =	(
	in doubles for	Persons x		EUR/pers./night =	(
	in twins for	Persons x		EUR/pers./night =	(
	in triples for	Persons x		EUR/pers./night =	(
	in quadruples for	Persons x		EUR/pers./night =	(
Apt. with 2	rooms for 5 persons	e: Persons x		EUR/pers./night =	(
Apt. with 2	rooms for 6 persons	e: Persons x		EUR/pers./night =	C		
TOTAL EUR TO BE PAID:				<u>EUR</u>	<u>c</u>		

PAYMENT CONDITIONS:

- 1) Deposit 1000,-EUR per team to be paid maximum within 21 days from registration
- 2) Rest payment up to total amount to be paid: before March 31, 2017 Invoices with bank details will be sent after registration.

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Date:	Form filled in by:	