Podistration form

Contact person: Address: Zip: City: Phone (home, work, fax & mobile): E-mail: Club shirt colors: We register the following teams: For teams in need of accommodations, please give us the number of players in each Ladies/Girls Men/Boys	Contact person:	Club:								Country	:		
Phone (home, work, fax & mobile) E-mail:	Phone (home, work, fax & mobile): E-mail:	Contact person:											
Phone (home, work, fax & mobile) E-mail:	Phone (home, work, fax & mobile): E-mail:	Address:				Zip:				City:			
Number of teams Number of players Number	Ladies	Phone (home, work, fax	& mobile	÷):									
Number of teams Number of players Number of teams Number of players Number	Number of teams Number of players Number of teams Number of players Number of teams Number of players	Club shirt colors:											
Number of teams Number of players	Number of teams Number of players Number of teams Number of players	We register the following	teams: F	or teams	; in need	d of accon	nmodatio	ns, ple	ase give us	the num	ber of p	players in each team.	
Senior Junior -81	Senior Junior -81 Junior -83 Junior -85 Junior -87 Junior -89 Junior -90 Junior -81 Junior -81 Junior -90 Junior -81 Junior -87 Junior -8				Ladies	3/Girls					Men/Bo	oys	
Junior -81 A-youth -83	A-youth -83 B-youth -85 C-youth -87 D-youth -89 Mini -90 Mini -91 Mini -90 Mini -91 Mini -91 Mini -91 Mini -91 Mini -90 Mini -91		Number	of teams	;	Number (of players	,	Number of	teams	Νι	umber of players	
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B-Youth -85	B-Youth -85		XX	<u> </u> '	—	 	<u> </u> '			<u> </u>	ļ	4	
C-Youth -87 XX	C-Youth -87	A-Youth -83	XX	<u> </u>	<u> </u>		<u> </u>				<u> </u>	_	
D-Youth -89 XX	D-Youth -89	B-Youth -85	XX	<u> </u> '	<u> </u>	 	<u> </u>				<u> </u>	_	
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Mini -90 XX	Mini -91 XX Total:	D-Youth -89	XX		<u> </u>				_			_	
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Mini -91 XX X		Mini -91	XX									7	
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Amount:	Amount:	Amount:	['	[7						T	
		Important information fr	om us - 1	to Eken C	lup:								
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Important information from us - to Eken Cup: We hereby commit to pay the above amount in SEK to: EKEN CUP:s postgiro 24 24 54-7 no later than April 25 2000. We understand the conditions of this registratio that the registration is binding.	We hereby commit to pay the above amount in SEK to: EKEN CUP:s postgiro 24 24 54-7 no later than April 25 2000 . We understand the conditions of this registration an	City:					Date:	Date:					
We hereby commit to pay the above amount in SEK to: EKEN CUP:s postgiro 24 24 54-7 no later than April 25 2000. We understand the conditions of this registratio that the registration is binding.	We hereby commit to pay the above amount in SEK to: EKEN CUP:s postgiro 24 24 54-7 no later than April 25 2000 . We understand the conditions of this registration an that the registration is binding.	Signature:		Drinte	Printed name:								