

Registration form - Eken Cup 2002

Club:	Country:	
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 team.

	Ladies/Girls		Men/Boys	
	Number of teams	Number of players	Number of teams	Number of players
Senior				
Junior -83				
A-youth -85				
B-youth -87				
C1-youth -89				
C2-youth -90				
D-youth -91				
Mini -92				
Mini -93				

We will pay registration and want accommodations in accordance with below:

	# teams:	# teams:	# Alt A	# Alt B	# Alt C	# Alt D	# Alt E	# Alt F	# Alt G	
Senior		XX								
Junior -83	XX									
A-Youth -85	XX									
B-Youth -87	XX									
C1-Youth -89	XX									
C2-Youth -90	XX									
D-Youth -91	XX									
Mini -92	XX									
Mini -93	XX									
Total:										
Price:	2.250:-	750:-	700:-	550:-	300:-	100:-	50:-	50:-	35:-	Total amount:
Amount:										

Important information from us such as special diets(kind and number of persons)- 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 26 2002.

we understand the conditions of this registration and that the registration is binding.

City:	Date:
Signature:	Printed name:

The registration form has to be sent no later than April 26, 2002 to:

EKEN CUP, c/o Mossberg, Skogsbo, 179 96 Svartsjö, SWEDEN