**Entry form TO BE SENT TO ijo@federsquash.it BY sunday, 26th may 2019**

|  |  |
| --- | --- |
| National Association: |  |
| Contact Person: |  |
| Phone: |  |
| Email: |  |
|  |  |
| Coach / Responsible Person: |  |
| Phone: |  |
| Email: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **#** | Name | TeeSize | ESID | Date of Birth | Event | Nat.Rank | Pkg | Extra night(s) |
|  | John Smith | XL | ES123456789 | 24.12.2000 | BU19 | 4 | C | 21-22, 25-26 |
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| 14 |  |  |  |  |  |  |  |  |