



22nd European Youth Championships
April 4 – 13 2009
Malmö – Sweden



Form A: Entry Form

Please return this form even if you do not want to participate in the EYC 2009!

Federation →	
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Confirmation	
We want to participate (Yes/No)	Yes <input type="checkbox"/> No <input type="checkbox"/>

The delegation	
Number of players in the team	
Number of officials connected to the team	

Contact information	
Contact person	
Address	
Phone	
Mobile	
Fax	
E-mail	

The ultimate deadline of submitting this form is January 16th, 2009			
Your contact person in the EYC 2009 Organizing Committee is Lena Sulkanen			
Phone	Mobile	Fax	E-mail address
+46 8 55 610 618	+46 768 21 17 98	+46 8 55 610 600	lana.sulkanen@swebowl.se



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Form B: Hotel Form for Ibis Hotel

Federation →	
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Are using another accommodation?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Number of rooms	Type of rooms	Arrival date	Departure date
	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>		
	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>		
	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>		
	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>		
	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>		
	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>		
	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>		
	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>		

Type of rooms (field no. 2 to in the table above):

S = Single Room / D = Double Room / T = Three Bed Room (Grand Lit + One bed)

The payment must take place directly to Swedish Bowling Federation before arrival.

The ultimate deadline of submitting this form is January 16th, 2009

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Form B Supporters: Hotel Form for Hotel Ibis

Federation →	
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Number of rooms	Type of rooms	Arrival date	Departure date
	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>		
	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>		
	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>		
	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>		
	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>		
	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>		
	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>		
	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>		

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Form C: Room list with names

Federation →

Your delegation divided at the hotel rooms

Room	Type	Please type all names at the room
1	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>	
2	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>	
3	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>	
4	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>	
5	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>	
6	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>	
7	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>	
8	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>	
9	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>	
10	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>	
11	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>	
12	S <input type="checkbox"/> D <input type="checkbox"/> T <input type="checkbox"/>	

Type of rooms (field no. 2 to in the table above):

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Form D: Arrival and departure

Federation →	
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Mean of transportation	
Will arrive by plane	<input type="checkbox"/>
Will arrive by train	<input type="checkbox"/>
Will arrive by bus or car	<input type="checkbox"/>

Arrival information	
Number of people	
Date in digital presentation	
Time in digital presentation	
Flight at the Malmö (Sturup) alt. Copenhagen (Kastrup) Airports	Sturup <input type="checkbox"/> Kastrup <input type="checkbox"/>

Departure information	
Number of people	
Date in digital presentation	
Time in digital presentation	
Flight from the Malmö (Sturup) alt. Copenhagen (Kastrup) Airports	Sturup <input type="checkbox"/> Kastrup <input type="checkbox"/>



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Form E: Names in delegation

Federation →	
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Players	
Name (first name, family name)	Function
	Girl player
	Girl player
	Girl player
	Girl player
	Boy player
	Boy player
	Boy player
	Boy player

Officials	
Name (first name, family name)	Function



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Form F: Press accreditation

Federation →	
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Registration information	
Federation (if any)	
Name	
Newspaper / Magazine	
Bringing laptop (Yes/No)	Yes <input type="checkbox"/> No <input type="checkbox"/>

