





INITIAL ENTRY FORM

(To be filled in and forwarded by 1st May 2011)

We will participate in the "CMAS FINSWIMMING WORLD CHAMPIONSHIP 2011" in Hódmezővásárhely- Hungary.

Initial Entry Form:

Country

Please complete this form and send it to CMAS HQ and Hungarian Divers Federation by e-mail spo@cmas.org and info@buvar.hu not later than 1^{th} May 2011.

Federation				
I				
Γotal number of Athletes	Male		Female	
		T .	Г	
Γotal number of Officials	Male		Female	
		1	7	
Γotal number of the delegation				
			_	
Declaration of liability: Release from liability: I/We hereby affiliates, the event Organizing Fedepersons that participate at the ever	eration and/or Co	mmittee and staff,	the venue owners	, sponsors, and any
Inscriptions and signatures will on INSURANCE COVERAGE POLICY for	•	presentation by ea	ach Federation of t	he obligatory ACCI
Please check CMAS Procedures for	participation in Cl	MAS Championshi	p.	
Date,2011				
(President's Signature,	 / stamp)		(Full name in	block letters)







PRELIMINARY HOTEL BOOKING FORM

(To be filled in and forwarded by 1^{st} May 2011)

Please complete this form and send to Hungarian Divers Federa	tion by e-mailto	info@buvar.hu <u>i</u>	not later than	1^{th}
May 2011.				

Country			
•			
Endonation			
Federation			
Telephone			
1			
Fax		e-mail	
Please comple	ete:		
	Number of Rooms		Date
<u> </u>	Number of Rooms	From	То
Single Double			
Double Triple			
		-	
	Number of Rooms		Date
	Nulliber of Rooms	From	То
Single Double			
Triple			
Extra Nights:	ra nights, please fill in the foll	owing:	
Extra Nights:	ra nights, please fill in the foll Number of Rooms		Date
Extra Nights: If you need ext		owing: From	Date To
Extra Nights: If you need ext Single Double			
Extra Nights: If you need ext Single Double			
Extra Nights: If you need ext Single Double		From	To Date
Triple Extra Nights: If you need ext Single Double Triple Single	Number of Rooms		То







Bank Transfer	Date of transfer :	Amount	See the attached document
B) 50% of total Amount and			
Bank Transfer	Date of transfer :		
Cash on Arrival			
BANK:			
Μασυαν Βίνναν Κααμεσουρίερο			
Magyar Búvár Szakszövetség		N. 111140 4070 001	70 2616 2200 5010 000
CIB Bank Zrt.	IBA		79 2616 3200 5010 0003
CIB Bank Zrt. H-1062 Budapest	IBA	.N: HU10 1070 00' I FT CODE: CIBHHU	
CIB Bank Zrt. H-1062 Budapest Andrássy út 70.	IBA		
CIB Bank Zrt. H-1062 Budapest	IBA		
CIB Bank Zrt. H-1062 Budapest Andrássy út 70.	IBA		
CIB Bank Zrt. H-1062 Budapest Andrássy út 70. Hungary	IBA		
CIB Bank Zrt. H-1062 Budapest Andrássy út 70. Hungary	IBA		
CIB Bank Zrt. H-1062 Budapest Andrássy út 70. Hungary	IBA SW	IFT CODE:CIBHHU	







BANK TRANSFER FORM

(Not later than 1th May 2011)

Please complete this form and send to Hungarian Divers Federation by e-mail info@buvar.hu <u>not later</u> May 2011.	than 1 th .
Ve confirm that the payment ofEuro from account our contribution for participation in the Finswimming World Championship 2011 at Hódmezővásárhely.	, is
Pate,2011	
(Presiden's t Signature / stamp) (Full name in block letters)	







COMPETITOR'S LIST FORM

(Not later than 15th June 2011)

Please complete this form and send to CMAS HQ by e-mail spo@cmas.org $\underline{not\ later\ than\ 15^{th}\ June\ 2011}.$

Cou	ıntry							
Fed	leration							
Ath	letes	Men			Women			
Offi	icials	Men			Women			
		•						
n.	Family N	Name	First Name	Del	nlete, Trainer, egation Chief,	Men	Women	Room type
1				Doct	or, Judge, Other			J 1
1								
2								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
	ARRIVAL:	Date:			Time:			
	Airport:				Flight			

ARRIVAL:	Date:	Time:	
Airm out.		Flight	
Airport:		No.	
DEPARTURE:	Date:	Time:	
Airm out.		Flight	
Airport:		No.	

Date,2011	
(President's Signature/ stamp)	(Full name in block letters)







FINAL HOTEL BOOKING FORM

(Not later than 15th June 2011)***

Please complete this form and send it to Hungarian Divers Federation by e-mail info@buvar.hu not later than 15^{th} June 2011.

Countr	ry			
Federa	ation			
Teleph	none			
	•			
Fax			e-mail	
Please	e complet	e:		
		Number of Rooms		Date
Cim ala		Tumber of Rooms	From	То
Single Double				
Triple				
			•	
				Date
		Number of Rooms	From	То
Single				
Double				
Triple)			
	Nights:	andalata ulasaa Cili ka dha Call		
II you	need extra	a nights, please fill in the foll	owing:	Date
		Number of Rooms	From	То
Single				
Doubl				
Triple	;			
		T	T	Date
		Number of Rooms	From	To
Single	<u> </u>			
Doubl	e			
Triple	•			







Bank Transfer	Date of transfer :	See the attached document
B) 50% of total Amount and		
Bank Transfer	Date of transfer :	
Cash on Arrival		
BANK: Magyar Búvár Szakszövetség		
CIB Bank Zrt.		70 0079 2616 3200 5010 0002
H-1062 Budapest Andrássy út 70.	SWIFT CODE:CI	ВННИНВ
Hungary		
Date,2011		
Date,2011		
Date,2011 (President's Sign		(Full name in block letters)