



# AFRICAN CHAMPIONSHIPS JUNIOR MEN AND WOMEN



## Form 1a: Individual Numerical Inscription

FEDERATION \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Weight category Men	Number of Participants
-55 kg	
-60 kg	
-66 kg	
-73 kg	
-81 kg	
-90 kg	
-100 kg	
+100kg	

Weight category Women	Number of Participants
-44 kg	
-48 kg	
-52 kg	
-57 kg	
-63 kg	
-70 kg	
-78 kg	
+78 kg	

Coaches	
Doctors	
Physiotherapist	
<b>Referees</b>	
Team Officials	

Total Competitors:		Total Officials:		Delegation Total:	
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Please send this document, completed to the organisers organizers [judobotswana@gmail.com](mailto:judobotswana@gmail.com) and [nabil01@hotmail.com](mailto:nabil01@hotmail.com) **before the 01 AUGUST 2012.**

DATE: \_\_\_\_\_

Signature of the head of the delegation and stamp of the federation



# AFRICAN CHAMPIONSHIPS JUNIOR MEN AND WOMEN



## Form 2a: FINAL ENTRY - WOMEN

COUNTRY		
Officials	Last Name (Family name)	First name (Given name)
Function		
Judoka	Last Name (Family name)	First name (Given name)
-44 kg		
-48 kg		
-52 kg		
-57 kg		
-63 kg		
-70 kg		
-78 kg		
+78kg		

Please send this document, completed to the organisers [judobotswana@gmail.com](mailto:judobotswana@gmail.com) and [nabil01@hotmail.com](mailto:nabil01@hotmail.com) before the **1<sup>st</sup> September 2012**.

DATE: \_\_\_\_\_

Signature of the head of the delegation and stamp of the federation

This form is only for organiser's purposes. Unless the inscription is done at [www.judobase.org](http://www.judobase.org) before the **1<sup>st</sup> September 2012** at midnight, the inscription is not valid.



# AFRICAN CHAMPIONSHIPS JUNIOR MEN AND WOMEN



## Form 2a: FINAL ENTRY – MEN

COUNTRY		
Officials	Last Name (Family name)	First name (Given name)
Function		
Judoka	Last Name (Family name)	First name (Given name)
-55 kg		
-60 kg		
-66 kg		
-73 kg		
-81 kg		
-90 kg		
-100 kg		
+100KG		

Please send this document, completed to the organisers [judobotswana@gmail.com](mailto:judobotswana@gmail.com) and [nabil01@hotmail.com](mailto:nabil01@hotmail.com) before the **11<sup>th</sup> June 2012**.

DATE: \_\_\_\_\_

Signature of the head of the delegation and stamp of the federation

This form is only for organiser's purposes. Unless the inscription is done at [www.judobase.org](http://www.judobase.org) before the **1<sup>st</sup> September 2012** at midnight, the inscription is not valid.



# AFRICAN CHAMPIONSHIPS JUNIOR MEN AND WOMEN



## Form 3 : Hotel Reservation Form

Federation		VAT Number	
Email		Telephone No	
Address			
Rep for the Delegation		Mobile No	

Hotel	Date of Arrival	Time of Check In	Date of Departure	Time of Check out	No of Nights	Guest Category (athletes, official, referee etc)	Guests per Room (1/2)	Name of Guests	Total Amount (P)
								Total	

The organising committee will contact you for the detailed rooming list once the allocation is confirmed. Please send this document, completed to the organizers [judobotswana@gmail.com](mailto:judobotswana@gmail.com) and [nabil01@hotmail.com](mailto:nabil01@hotmail.com) **before the 20 August 2012.**

To confirm your entry you are kindly asked to transfer the amount for your team by not later than the above deadline.

DATE: \_\_\_\_\_

\_\_\_\_\_  
Signature of the head of the delegation and stamp of the federation



# AFRICAN CHAMPIONSHIPS JUNIOR MEN AND WOMEN



## Form 4: Travel Schedule and Transfers

Federation	
Email / Mobile	

### Travel by Plane

Date of Arrival	Arrival Flight No	Arrival Flight Time	Originating airport	Arrival airport	No of Persons
Date of Departure	Departure Flight No	Departure Flight Time	Departing from airport	To airport	No of Persons

### Travel by Train

Date of Arrival	Train Number	Arrival Time	Originating station	Arrival station	No of Persons
Date of Departure	Train Number	Departure Time	Departing from station	To station	No of Persons

### Travel by Car

Date of Arrival	Arrival Time	No of Persons	Date of Departure	Departure Time	No of Persons

Please send this document, completed to the organisers [judobotswana@gmail.com](mailto:judobotswana@gmail.com) and [nabil01@hotmail.com](mailto:nabil01@hotmail.com) **before the 01<sup>st</sup> September 2012.**

DATE: \_\_\_\_\_

Signature of the head of the delegation and stamp of the federation



# AFRICAN CHAMPIONSHIPS JUNIOR MEN AND WOMEN



## Form 5: Visa Application Form

FEDERATION \_\_\_\_\_

WE NEED THE INVITATION FROM [ ] TILL [ ] OCTOBER 2012

WE WILL APPLY FOR VISAS AT BOTSWANA EMBASSY IN [ ] (COUNTRY, CITY)

*We kindly ask you to complete all columns in block letters. To arrange visas we also need a copy of the first page of the passport (where the picture is) of each participant*

No	Surname	First name (full as in passport)	Sex	Position	Date of birth	Nationality	Passport number	Date of issue	Date of expiry

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**PLEASE RETURN THIS FORM TO THE ORGANISERS BEFORE 15<sup>th</sup> AUGUST 2012**