



Form 3

Players Registration – Deadline: 28.05.2018

Technical Director:
Dietmar Marschner
E-Mail: athletics@edso.eu

Preliminary entry: 30.11.2017 (Form 1)
Final entry: 28.02.2018 (Form 2)
Player Registration: 28.05.2018 (Form 3)

EDSO Representative:
Ota Pansky
E-Mail: pansky@edso.eu

Please!!! We ask you to return this form to Dietmar Marschner and cc to Bjørn Røine even if your country is not intending to participate. It is important for our preparations! Thank you!

4th European Deaf Athletics U20 U18 Championships 29 June to 01 July 2018 in Sofia, Bulgaria

Nation	
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MEN

	FAMILY NAME	First Name	Date of Birth	ICSD ID #
1				
2				
3				
4				
5				
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19				
20				



WOMEN

	FAMILY NAME	First Name	Date of Birth	ICSD ID #
1				
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3				
4				
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6				
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20				

Officials

	FAMILY NAME	First Name	Position
1			
2			
3			
4			
5			
6			
7			



**The position of each official must be entered. For example:
President , Leader, Coach, Assistant Coach, Doctor, Physiotherapist, or Interpreter**

Our delegates will attend the Technical Meeting, they are:

	FAMILY NAME	First Name	Position	
1.				Deaf
2.				Deaf/Hearing

DECLARATION

On behalf of our players and officials we declare that we have read and will comply with the regulations for the EDSO Competitions and the information provided by us in this form is accurate to our knowledge.

We confirm that all our players named herein are deaf, citizens of our country, and registered under the appropriate gender. All our players and officials have a current valid passport issued by our country.

We understand that a fine will be levied on any athlete withdrawn after the final entry. The schedule fees are shown on the EDSO website:

<https://www.edso.eu/wp-content/uploads/2018/03/EDSO-Schedule-Fees-v3.1.pdf>

*No player can be replaced after the final entries on **28 05 2018**, with the exception of those with a valid doctor's certificate that the player should not be allowed to start.*

**We hereby confirm that we have read and understood the
EDSO General Sports and Technical Regulations.**

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President (Name and signed)

Secretary (Name and signed)

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Date (dd/mm/yyyy)