EACH ATHLETE MUST SUBMIT THIS FORM TOGETHER WITH A CERTIFIED COPY OF THEIR BIRTH CERTIFICATE AND PROOF OF CITIZENSHIP. Please type or write in **CAPITAL LETTERS**.



Athlete Registration Form 2025/26

ATHLETE PERSONAL DETAILS				
Family Name / Surname (as it appears in the pas	ssport)	Given Name (as it appear	rs in the passport)	
Data of Birth (s. v. 24.00.2004)		Gender		
Date of Birth (e.g. 21-09-2004)	г	M \F		
	L			
Nationality		Current Club		
Cell	Email			
ATHLETE PRIMARY CONTACT DETAILS				
Father/Guardian Surname		Father/Guardian Name		
Office Phone H	Home Phone		Cell	
Email				
Mother/Guardian Surname		Mother/Guardian Name		
Office Phone	Home Phone		Cell	
Email				
Signature of Applicant			Date	