**PARTICIPATING FEDERATION DETAILS:**

|  |  |
| --- | --- |
| Name of Federation: |  |
| Telephone Number: |  | Fax Number: |  |
| Email Address: |  |

Mark with **X** either Single or Double Room. If Double Room, please state with whom it is sharing.

**SEMINAR PARTICIPANTS:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** | **Surname** | **Sex** | **Grade** |  **Club** | **Single Room** | **Double Room** |  Sharing with | Date arriving | Date departing \* |
|  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |  |

**\* Please note that seminar ends at 13:00 on Sunday 21st October 2012**

Signature of Federation Official Date