**Form 2 - FINAL ENTRY - WOMEN**

**Please return before 10th of April 2014**

*• Phone: +40 21 317 80 30*

*• Fax: +40 21 317 99 54*

*• E-mail:* *office@frjudo.ro*

|  |
| --- |
|  |

**Team of:**

**Officials**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Surname** | **First name** | **Function** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |

**Referees**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Surname** | **First name** | **Licence** |
| 1. |  |  |  |
| 2. |  |  |  |

**Girls**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **W. cat.** | **FAMILY NAME** | **First name** | **Date of birth** | **Participating in Training camp****Yes / No** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| Date: | Stamp | Signature |