



WAKO EUROPEAN KICKBOXING CHAMPIONSHIP
(Cadets & Juniors)
ALL DISCIPLINES



August 25 – September 03 / 2023 TÜRKİYE - ISTANBUL

APPENDIX 1

PARTICIPATION FORM

Name of Association:	
Address:	
Telephone No:	Fax No:
E-mail:	Mobile phone:

(THIS FORM MUST BE SENT BY AUGUST 04, 2023 AT THE LATEST)

Chief Delegation	Officials	Referees
Coaches		
	Journalists	Others

Those mentioned above will participate in the WAKO European Championship Cadets and Juniors.

Team composition (Note: Enter the total numbers in each box.)

Athletes		Coaches		Officials		Referees		Others	Grand Total
Male	Female	Male	Female	Female	Male	Female	Male		

Signed: _____

Signature and stamp: _____



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APPENDIX 2

HOTEL RESERVATION FORM

Please return: by 04th August 2023		Please send this form by e-mail to: Mr. Ömer BEKTAŞ 2023europechampionship@gmail.com	
Federation / Club / Individual:			
Country:			
Address:			
Phone:		E-mail:	

TUYAP PALAS HOTEL *****

	Room type	Arrival date	Departure date	Number Rooms	Number Persons	Num. Nights	Per night	Total amount
5 stars*****	Single						€ 130,00	
	Double						€ 110,00	
TOTAL								



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APPENDIX 3

AIRPORT – HOTEL – AIRPORT TRANSFER FORM

Please return: by 04th August 2023		Please send this form by e-mail to: Mr. Ömer BEKTAŞ 2023europechampionship@gmail.com	
Federation / Club / Individual:			
Country:			
Address:			
Phone:		E-mail:	

TRANSFER SERVICE WILL ONLY BE MADE FROM AIRPORT

ARRIVAL				
DATE	TIME	FLIGHT NUMBER	AIRPORT	NUMBER OF PERSONS

DEPARTURE				
DATE	TIME	FLIGHT NUMBER	AIRPORT	NUMBER OF PERSONS

Signed: _____

Signature and stamp: _____



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APPENDIX – 4

APPLICATION FORM FOR VISA REQUEST

WAKO COUNTRY MEMBER: _____

ADDRESS: _____

PHONE: _____

FAX: _____

E-MAIL: _____

	NAME and SURNAME	PASSPORT NO	DATE of BIRTH	DATE of ISSUE	GENDER	STATUS
EX.	VALERY ROSE	U 4562481	14.10.2002	25.12.2024	F	ATHLETE
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						

DATE:

SIGNATURE: