

**PRELIMINARY ENTRY FORM****PLEASE RETURN THIS FORM BY THE 23<sup>rd</sup> of September 2019**

ISU MEMBER : _____	COUNTRY : _____
TEAM : _____	CATEGORY : _____
CLUB : _____	CITY : _____
Please fill in the names of the:	
TEAM MANAGER :	
TEAM CHAPERONNE 1 :	
TEAM CHAPERONNE 2 :	
COACH :	
CO-COACH :	

<b>Signature of team official: and name in capitals</b>  <b>Position of team official and date:</b>	

Please indicate if you require unofficial practice ice on Tuesday 10<sup>th</sup>, Wednesday 11<sup>th</sup>, Thursday the 12<sup>th</sup> of December and how many blocks you would ideally like to book. Please let us know if you want to use the indoor or outdoor ice rink.

The unofficial practice ice is in 15 minute blocks, with a minimum of 2 blocks.

**I would like to reserve:**

DATE	NUMBER OF BLOCKS	INDOOR/OUTDOOR

Please email this form as soon as possible to: [lumierecup@hotmail.com](mailto:lumierecup@hotmail.com), but latest at the 23<sup>rd</sup> of September 2019.

TEAM NAME: \_\_\_\_\_ CATEGORY: \_\_\_\_\_

We can inform you about accommodations, transportation, meals etc,  
Please tick if you need information about the services we can offer you.

We are interested in information about:

- Accommodations
- Meals at the ice rink
- Lunch packages
- Transportation accommodation ↔ ice rink
- Transportation airport ↔ accommodation
  
- We are not interested in any of these services.

We would appreciate if you can provide us with information about:

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