

PRELIMINARY ENTRY FORM**PLEASE RETURN THIS FORM BY THE 1st of October 2020**

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 :	

Signature of team official: and name in capitals	
Position of team official and date:	

Please indicate if you require unofficial practice ice on Tuesday 8th, Wednesday 9th, Thursday the 10th, Friday the 11th (Interclub) 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: lumiirecup@hotmail.com, but latest at the 1st of October 2020.

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:
