***Registration form***

Country : ………………………………………….. Code : …………………………………

National Federation: …..…………………………………………………………………………………………………….

Date: …………………………… Signature: ……………………………………………………………….

**Staff members: Total number of pers : ………….. (ACC. 75 EUR/pp)**

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| **Name**  | **First Name** | **UCI Codes** | **GENDER (M/W)**  | **ARRIVAL DATE** |
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| **Name**  | **First Name** | **UCI Codes** | **GENDER****(M/W)** | **CLASS** | **RR** | **TT** | **TR** |
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**Athletes and Pilotes: Total number of athletes & Pilots : ………….. (ACC. 75 EUR/pp)**

**Gelieve dit formulier terug te bezorgen aan de heer Dirk De Jonghe:**

**Veuillez retourner ces formulaires à M. Dirk De Jonghe:**

***Please return these forms to Sir* *Dirk De Jonghe:*** ***race.registration@paracycling.eu***

***Accreditation payable to :***

Alain demortier, Gistelsesteenweg 1C2, 8400 Oostende / Ref. International Sport Organisation/UCI Accreditation

KBC Bank, Elisabethlaan 22, 8400 Oostende / Iban nummer: BE39 7340 6689 2219 / Bic code: KREDBEBBXXX