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| **ISU Member:** |  |
| **Team Name:** |  |
| **Contact Person:** |  |
| **Phone:** |  |
| **E-Mail:** |  |

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| **Family** **(Last) name** | **Given** **(First) name** | **Address** | **Passport** **number** | **Passport date of expire****(DD/MM/YY)** | **Date** **of birth****(DD/MM/YY)** | **Sex** **(male/****female)** | **Function in Team** | **EMBASSY** **where VISA will be processed** |
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| ISU Member Federation: |       | Date and Signature: |       |