



PRELIMINARY ENTRY FORM
17th FINA WOMEN'S WATER POLO WORLD CUP 2018
September 04-09, SURGUT (RUSSIA)



FEDERATION: _____

CONTACT PERSON: _____

E-MAIL: _____ **TEL:** _____

PLAYERS:

No	FAMILY NAME	GIVEN NAME	DOB	PASSPORT NO.	EXPIRY DATE
1.					
2.					
3.					
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17.					
18.					

OFFICIALS:

FAMILY NAME	GIVEN NAME	GENDER	PASSPORT NO.	EXPIRY DATE	FUNCTION

SIGNATURE: _____ **DATE:** _____

PLEASE RETURN THIS NOT LATER THAN 20 July 2018 to rus_waterpolo@mail.ru



28-06-2018