

FORM C – Athlete Registration

☐ Please check if this person is an Alternate (Substitute/Reserve)

(Please print in ink using block letters or type)

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(If you are not using digital photos, attach 2 passport size photos)

(Please note that Last and First Name should be written in LATIN characters as in Passport)

Delegation																				SO Region			
Name: Last/Family (as in Passport)										First (as in Passport)										Middle Initial		Gender: M/F	
Address																							
City										State/Province										Country			
Date of Birth: dd-mm-yyyy																							
Nationality										Place of Birth													
Passport Number										Passport Expiration Date: dd-mm-yyyy													

Visa Required? ☐ Yes ☐ No Consulate or Embassy you will apply for VISA

If you need an invitation letter in order to issue a Passport, fill in your ID No.

Wheelchair: ☐ Yes ☐ No

Allergies: (list)

Dietary Restrictions: (list)
