



FIRST ENTRY FORM - INDIVIDUAL JUNIOR

Please fill out and send this entry form by OCT 30, 2019 to the offices of the Organizing Committee (Email: judokuwait1@gmail.com) and the JUA Head Sports Director (Email: chelucky@macau.ctm.net)

Club:				Federation:				
Tel.:		Fax:		E-mail:				
Number of Officials:					ımber of Compe	titors:		
ase tick / o	check the Yes or	No column indicat	ing if you	have	participants in the	following individu	ial categor	
No.	Men	Yes	No		Women	Yes	No	
1.	-60kg			\dashv	-48kg			
2.	-66kg				-52kg			
3.	-73kg				-57kg			
4.	-81kg				-63kg			
5.	-90kg				-70kg			
6.	-100kg				-78kg			
7.	+100kg				+78kg			
se tick / o	check the Yes or	No box indicating	if you wil	l take p	part in the Men and	l/or Women team	n competiti	
Men Tea	am: Yes	No 🗆		Wom	en Team: Yes	s□ No[
	-t/C Ct-	ry's Signature &	Nate		Fadaration / Acco	ociation : Officia	l Stame	





FINAL ENTRY FORM - INDIVIDUAL JUNIOR

Please fill out and send this entry form by NOV 30, 2019 to the offices of the Organizing Committee (Email: judokuwait1@gmail.com) and the JUA Head Sports Director (Email: chelucky@macau.ctm.net)

Tel.:		Fax:	E	E-mail:			
Number of Officials:			N	umber of Compe	titors:		
ase tick / o	theck the Yes or	No column indicat	ing if you have	participants in the f	following individu	ual catego	
No.	Men	Yes	No	Women	Yes	No	
1.	-60kg			-48kg			
2.	-66kg			-52kg			
3.	-73kg			-57kg			
4.	-81kg			-63kg			
5.	-90kg			-70kg			
6.	-100kg			-78kg			
7.	+100kg			+78kg			
mse tick / c				part in the Men and nen Team: Yes	or Women tean		
Presider	nt/Gen. Secreta	ary's Signature &	Date	Federation / Asso	ciation : Officia	al Stamp	





FINAL ENTRY FORM - INDIVIDUAL JUNIOR MEN

Please fill out and send this entry form by NOV 30, 2019 to the offices of the Organizing Committee (Email: judokuwait1@gmail.com) and the JUA Head Sports Director (Email: chelucky@macau.ctm.net)

Club:					Federation:				
Tel.:			Fax:		E-mail:				
Addre	ess:								
mpeti	tors:			189					
No.	Men	·	Last Name		First Name		Date of Birth	Passport No	
1.	-60k	g							
2.	-66k	g				\exists			
3.	-73k	g				\exists			
4.	-81k	g		1		\neg			
5.	-90k	g				T			
6.	-100k	g		1		\neg		8	
7.	+100	kg				\exists			
Officia	ıls:								
Posi	tion	L	ast Name	Fi	rst Name	Da	ate of Birth	Passport No.	
				8					
			etary's Signature				ssociation Offic		





FINAL ENTRY FORM - INDIVIDUAL JUNIOR WOMEN

Please fill out and send this entry form by NOV 30, 2019 to the offices of the Organizing Committee (Email: judokuwait1@gmail.com) and the JUA Head Sports Director (Email: chelucky@macau.ctm.net

Club:				Federation:				
Tel.:		Fax:		E-mail:				
Addre	288:							
mpeti	tors:							
No.	Men	Last Nam	e	First Name	Date of Birth	Passport No		
1.	-48kg							
2.	-52kg							
3.	-57kg							
4.	-63kg							
5.	-70kg							
6.	-78kg							
7.	+78kg							
Officia	ıls:							
Posi	tion	Last Name	-	irst Name	Date of Birth	Passport No		





TRAVEL SCHEDULE

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Club:		Federation:	
Tel.: Fax:		E-mail:	
Address:			
	Arrival a	at Kuwait Airport	
Date	Time	No. of Person	Airline & Flight No.
	Departure	from Kuwait Airpo	rt
Date	Time	No. of Person	Airline & Flight No.





HOTEL RESERVATION FORM

Please fill out and send this entry form by NOV 25, 2019 to the offices of the Organizing Committee (Email: judokuwait1@gmail.com) and the JUA Head Sports Director (Email: chelucky@macau.ctm.net)

Club:			Federation:					
Tel.:	Fax:		E-mail:					
Hotel – Please selec	t the hotel which	you wa	ant to	book				
MOVENBEK INTERCONTINEN					KUV	VAIT PLAZA		
Name	Arrival Date	Depar Dat	ture te	Single Room	Twins Room	Number Of nights	Total amount	
				Total A	mount			
10.00 again 10.00 again								
President/Gen. Secr	retary's Signature &	Date	F	ederation	/ Associat	ion Official S	Stamp	

For detailed hotel accommodations' information, please refer to the Event Outlines.



Club:



VISA APPLICATION FORM

Please fill out and send this entry form by NOV 30, 2019 to the offices of the Organizing Committee (Email: judokuwait1@gmail.com) and the JUA Head Sports Director (Email: chelucky@macau.ctm.net)

Federation:

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	Address:										
	No	Name	Surname	Date of Birth	Place of Birth	Nationality & Passport No.	Date of issue	Date of Expiry			
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	1 1 1 1										
						8					
			8			8					

(Signature of President / General Secretary)	(Stamp)