***Synchronized skating competition 12.-15.12.2024. Riga, Latvia***

**OFFICIAL ENTRY Form 1**

**DEADLINE October 15, 2024**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| ISU member: |  | | | | | | |
| Category: |  | | | | | | |
| Team name: |  | | | | | | |
| Country: |  | | | | | | |
| Team manager: /officials name& address |  | | | | | | |
| Email: | |  | | | phone Nr: |  |
| Team leader: |  | | | | | | |
| Email: | |  | | | phone Nr: |  |
| Team personnel: |  | | | | | | |
| Email: |  | | | | phone Nr: |  |
| Medical: |  | | | | | | |
| Email: | | |  | | phone Nr: |  |
| Team coaches: Name and signature |  | | | | … |  | |
|  | | | | … |  | |
|  | | | | … |  | |

|  |  |  |
| --- | --- | --- |
| **Date:** | **Title:** | **Name:** |

**Please return this form to the Riga Amber Cup 2024 Organizing Committee as a Word document via email to: RigaAmberCup@inbox.lv**