

SWIFT CODE:

The 2nd ASFAA Sport for All Training Course Macau, China



Registration Form (For non-local participants only)

Organization:	
Contact Name:	
Address:	
Country:	
Phone:	
Fax:	
Email:	
Expect Number of Partic	cipants:
•	icipants from each non-local organization is limited to 5 people, participants ne, first serve basis. Organizer reserves the right of final decision in case of
Signature:	Date:
Please return this form b	efore the following day
Registration before 27th April: Registration after 27 th April will	registration, participants can apply the refund of registration fee before 4th May.
Bank Information	
BENEFICIARY NAME: ACCOUNT NO.: BENEFICIARY ADDRESS:	FUNDO DE DESENVOLVIMENTO DESPORTIVO 010120788245 AV. DR. RODRIGO RODRIGUES, S/N FORUM DE MACAU BL.I 4-AND MACAU
BANK NAME: BANK ADDRESS:	BANK OF CHINA MACAU BRANCH BANK OF CHINA BUILDING AVENIDA DOUTOR MARIO SOARES MACAU

BKCHMOMX

E-mail: sport@macau.ctm.net Website: http://www.sport.gov.mo



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Itinerary Form

Deadline: 4th May 2012

First Name:	Family Name:
Organization:	Title:
Male □ Female □	Passport No.:
Nationality:	Date of Birth:/(dd/mm/yy)
Address:	
Email:	
Telephone:	Fax:
Arrival Date:	Departure Date:
Arrival Time:	Departure Time:
Flight No.:	Flight No.:
Flight No.:	
Flight No.:	Flight No.: ACCOMMODATION
Flight No.: A Name of the person shared with	Flight No.: ACCOMMODATION (if any)
Flight No.: A Name of the person shared with	Flight No.: ACCOMMODATION (if any) and attach.
Name of the person shared with Notes: 1. Kindly scan / photocopy your passport a	Flight No.: ACCOMMODATION (if any) and attach.
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