



28. FEB - 05. MAR 2017

KONTIOLAHTI

IBU CUP BIATHLON

Appendix 1 TEAM APPLICATION FORM FOR IMPORT OF RIFLES AND AMMUNITION

To be returned by 14.2.2017 to Kontiolahti Biathlon Office
e-mail: ibucup2017@biathlon-kontiolahti.fi, fax +358 13 732 402

National Association:	Contact Person:
Mobile phone:	Fax:
E-mail:	

Border where import will take place:
Date of arrival into Finland:
Date of arrival to Joensuu/Kontiolahti:
The latest day of departure from Finland:

SURNAME	FIRST NAME	DATE OF BIRTH	PASSPORT NUMBER	TRADE-MARK	SERIAL NUMBER	QUANTITY AMMUNITION

DATE:

SIGNATURE