**PRELIMINARY ENTRY FORM**

**National Weightlifting Federation of ………………………………**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No.** | **Category** | **Name of athletes** | **Date of Birth** | **Passport Number** | **Entry Total** |
| **1** |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |

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| --- | --- | --- | --- | --- | --- |
| **No.** | **Name of Officials** | **Function** | **Date of Birth** | **Passport Number** | **Entry Total** |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |

**President / General Secretary…………………......... Signature: ……………………..**

 **Date: -----------------------------**

**This form must be returned by 25th January 2017 to the I.R. of Iran Weightlifting Federation (IRIWF)**

 Weightlifting Hall, Azadi Sport Complex

 Tel/Fax: (+9821) 44701742

 Email: iriwf@iriwf.org

and the International Weightlifting Federation (matyas.lencser@iwfnet.net).

**FINAL ENTRY FORM**

**National Weightlifting Federation of ………………………………**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No.** | **Category** | **Name of athletes** | **Date of Birth** | **Passport Number** | **Entry Total** |
| **1** |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |

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| **No.** | **Name of Officials** | **Function** | **Date of Birth** | **Passport Number** | **Entry Total** |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |

**President / General Secretary…………………......... Signature: ……………………..**

 **Date: -----------------------------**

**This form must be returned by 15th February 2017 to the I.R. of Iran Weightlifting Federation (IRIWF)**

 Weightlifting Hall, Azadi Sport Complex

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 Email: iriwf@iriwf.org

and the International Weightlifting Federation (matyas.lencser@iwfnet.net).

**ARRIVAL/DEPARTURE FORM**

**National Weightlifting Federation of ………………………………**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No.** | **Full name of delegates** | **Arrival Date and time** | **Arrival Flight Number** | **Departure Date and time** | **Departure Flight Number** |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |
| **4** |  |  |  |  |  |
| **5** |  |  |  |  |  |
| **6** |  |  |  |  |  |
| **7** |  |  |  |  |  |
| **8** |  |  |  |  |  |

***TEAM ACCOMMODATION FORM***

**National Weightlifting Federation of ………………………………**

|  |  |  |
| --- | --- | --- |
| **Date** | **Single room** | **Double room** |
| 9 March 2017 |  |  |
| 10 March 2017 |  |  |
| 11 March 2017 |  |  |
| 12 March 2017 |  |  |
| 13 March 2017  |  |  |

**President / General Secretary…………………......... Signature: ……………………..**

 **Date: -----------------------------**

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 Email: iriwf@iriwf.org

***MEDIA & PHOTOGRAPHER FORM***

**National Weightlifting Federation of ………………………………**

**Name of the participant’s country …………………………………**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No.** | **Full name**  | **Arrival Date and time** | **Arrival Flight Number** | **Departure Date and time** | **Departure Flight Number** |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |
| **4** |  |  |  |  |  |

**President / General Secretary…………………......... Signature: ……………………..**

 **Date: -----------------------------**

**This form must be returned by 15th February 2017 to the I.R. of Iran Weightlifting Federation (IRIWF)**

 Weightlifting Hall, Azadi Sport Complex

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 Mobile : (+98 ) 912 4780513 , (+98) 935 2780513

 Email**: iriwf@iriwf.org**

**VISA**

**APPLICATION FORM**

**National Weightlifting Federation of ………………………………**

**Name of the participant’s country …………………………………**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Family | Given | Date of BirthDD/MM/YYYY | Gender (M/F) | Passport Number  | Nationality | Occupation |
|  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |

**President / General Secretary…………………......... Signature: ……………………..**

 **Date: -----------------------------**

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