



1st European Deaf Bowling Cup
23-27 November 2015 Yerevan / Armenia



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Armenian Sports Committee of the Deaf
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Preliminary entry: 01.03.2015
Final entry: 01.07.2015
Name registration 01.10.2015



Preliminary Registration Form

NATION _____

We will participate in the European Deaf Bowling Cup

Young athletes to 23 years old

	athletes	Yes	No
Women	1		
Men	1		

Athletes 23 and older.

	athletes	Yes	No
Women	1		
Men	1		

Name of the Organisation: _____

Address: _____

E Mail _____ Fax: _____

Date _____ President _____ Secretary _____

This **PRELIMINARY REGISTRATION FORM** must be send by e-mail to the EDSO
Bowling Technical Director at - bowling@edso.eu
BY **01 March 2015**