

## Registration Form

## 6 th European Kaninhop Championship

Cleinna															
Name of			Street:												
Attendent:															
Zip Code/City:				Regional											
			association:												
Telefone:			@-mail												
Nation:			Club:												
☐ I would be re	ady t	o as	sist during t	he c	om	petit	tion	(pu	ıt ba	ırs t	ack	up)			
Rabbit's	Breed		Coat	Straight Line Par				Parc	ours	ours Free Jumpi				ng	
Name				L	М	M S E L M		М	S	E	L M S		S	E	
	•		Order of	foo	d (p	leas	e x)	:		•					
_			Friday				Sa	itur	day	'		S	Sun	day	
Breakfast each 2,50€															
Lunch each 4,00€															
, -															
Dinner each 2,50€		:													
Food allergies and special food desires:															
															_
			Starts				f e	ach							
			Catalog			5€ each 3€ each									
			Breakfast			2,50€ each									
			Lunch			4,00€ each									
			Dinner			, 3,50€ each									
1x			Postal fee			1,50€					1,50€				

I accept the implementing rules for kaninhop in the EE and the body of rules and standards of the championship. I agree with my data and photos being published by the organizer in reports (e.g. in the catalog).

Signa	ature
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