**PRELIMINARY/FINAL ENTRY FORM**

**International SAMBO Tournament**

**“CYPRUS 2025”**

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| **Country/Club:**  **e-mail:**  **Tel. And name of coach:**  **Date of Arrival in case of accommodation needed:** | **Total number of people** |

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| ***№*** | ***FULL Name as in the passport*** | ***PASSPORT NUMBER*** | ***Gender***  ***M/F*** | ***Date of birth*** | ***Weight category,***  ***sports /combat sambo*** |
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**Please return to:** [**info@cyprussambo.org**](mailto:info@cyprussambo.org)