

Nicosia Squash Association
HANDICAP SQUASH TOURNAMENT
2018-2019



ENTRY FORM

I apply for entry to the **NSA Handicap Squash Tournament 2018-19** and undertake to comply with all rules and regulations of the tournament.

NAME:

I.D. NUMBER:

DATE OF BIRTH:

CONTACT:

*HC NUMBER:

*HC EXP. DATE:

NSA REG. NUMBER:

***IF A HEALTH CERTIFICATE IS NOT PRESENTED (HC) THE FOLLOWING DISCLAIMER IS REQUIRED FOR PARTICIPATION.**

Please select:

☐

I enclose the amount of €30 being the entry fee for the event.

☐

I own the "All Inclusive" package that includes this event.

DISCLAIMER

I hereby declare that I comprehend the need for acquiring a valid health certificate from Cyprus Sports Organization (ASYA/KOA) for me / my child, as a requirement for participating in the **NSA Handicap Squash Tournament 2018-19**. Still, choosing not to do so, I submit this statement relieving the organizers and sponsors from any responsibility for accidents and injuries that might occur during the event.

Signature:

Date:.....

In the case of minor, Parent or guardian should sign.

Deadline for entries – Friday September 7th, 2018