**International Shinkyokushinkai Karate Championship “Andrei Yakutov 31th Memorial”**

**22-25.09.2023 NOVOSIBIRSK, RUSSIA**

**VISA ASSISTANCE FORM**

***Important:*** please, fill in this form and send it to: fsknso@bk.ru along with **passport copies of all visa applicants**, to receive an invitation letter.

LOCATION of EMBASSY FOR VISA APPLICATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

e-mail of EMBASSY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Name of the team: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| # | Position in the team | GenderM/F | Family name (as in passport) | Given name (as in passport) | Date and place of birth | Passport No. | Passport date of issue | Passport expiration date | Citizenship and place of living | Dates of stay in Russia | Places to visit in Russia | Place of work, position, address of organization, phone nr., e-mail |
| 1 | athlete | M | IVANOV | IVAN | 01.01.2004Alma-Aty | 72 3564019 | 01.03.2017 | 01.03.2027 | Kazakhstan | 18-21.10.2019 | Novosibirsk | School #123, pupilAddress: 31 Berezovaya str., Alma-Aty, Kazakhstan. Tel. +7(415)235678, school123@bk.kz |
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Signature of the President:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Stamp of the club/team:

Please fill in and send this form to the Organizing Committee by email no later than the 30th of August 2023.