

# 13. TIRNAVIA ICE CUP

October 29 – November 1, 2020



## Composition of Delegation:

**THIS FORM MUST RETURN BEFORE: 12.10.2020**

Please fill in with type or write in capital letters!

ISU Member Federation: \_\_\_\_\_  
Figure Skating Club: \_\_\_\_\_

A. Team-Leader: \_\_\_\_\_

### B. Competitors

First Name	Last Name	First Name	Last Name
1: _____	_____	10: _____	_____
2: _____	_____	11: _____	_____
3: _____	_____	12: _____	_____
4: _____	_____	13: _____	_____
5: _____	_____	14: _____	_____
6: _____	_____	15: _____	_____
7: _____	_____	16: _____	_____
8: _____	_____	17: _____	_____
9: _____	_____	18: _____	_____

### C. Judges

First Name	Last Name	First Name	Last Name
1: _____	_____	3: _____	_____
2: _____	_____	4: _____	_____

ISU Member Federation: \_\_\_\_\_

Date, Signature: \_\_\_\_\_

#### Please mail:

Figure Skating Club Trnava  
Spartakovska 1/A  
917 01 TRNAVA  
Slovak Republic  
Phone: +421 905 944 289  
E-mail: curmaj@gmail.com