



# 4<sup>th</sup> European Deaf Beach Volleyball Championships

12-19 August 2018

Kiev, Ukraine



## FLIGHT INFORMATION FORM

COUNTRY	
NAME OF THE FEDERATION	
NUMBER OF PEOPLE	
ARRIVAL AIRPORT <i>(Boryspil Airport or Zhylyani Airport)</i>	
FLIGHT NUMBER:	
DAY:	
TIME:	
DEPARTURE AIRPORT <i>(Boryspil Airport or Zhylyani Airport)</i>	
FLIGHT NUMBER:	
DAY:	
TIME:	
CONTACT NAME:	
EMAIL ADDRESS:	
MOBILE SMS: <i>(Viber, WhatsApp) Please include your country code</i>	

### DECLARATION OF UNDERSTANDING

We hereby certify that the statements and information in this application form are true and correct

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

DEADLINE: 12 May 2018

PLEASE SEND THE FLIGHT INFORMATION FORM TO: [EDBV2018@GMAIL.COM](mailto:EDBV2018@GMAIL.COM)