

BV-02

**CEV BEACH VOLLEYBALL
WILD CARD APPLICATION**



The National Federation of _____

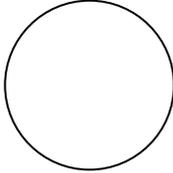
requests a wildcard for the following competition and team(s):

Category:	European Championship
	Zonal Tour (-15 days)
City & Country of the competition:	
Date of the competition:	
Competition Phase:	Main Draw Qualification

	Shirt #	FIVB #	Last name	First name
MEN	1			
	2			
WOMEN	1			
	2			

Reasons:

Only one form may be submitted per gender per National Federation and competition.

_____ Name of the President and/or Secretary General (printed)	
_____ Signature of the President and/or Secretary General	
_____ Date and Venue	

This form must be sent to beach@cev.lu duly completed before the registration deadline (see above) of the competition the team wants to participate in.

Late requests will not be considered.