**BLIND GAMES INTERNATIONAL GOALBALL TOURNAMENT – 2024**

**FIRST ENTRY FORM**

Complete this form and send by email at dtn@anddvis.pt , **no later than March 15th, 2024.** Remember to attach the bank receipt of **the first payment of 300 €.**

# TEAM: Male Female

# COUNTRY:

# NUMBER OF PLAYER:

# NUMBER OF STAFF:

# CONTACT PERSON:

# E-MAIL:

# PHONE NUMBER:

# OTHER CONTACT DETAILS FOR COMMUNICATION:

# COMMENTS:

**BANK TRANSFER IBAN: PT50 0035 0396 00222264130 69**

**BIC/SWIFT: CGDIPTPL**

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| Beneficiary Bank: ANDDVIS |
| Bank Name: CAIXA GERAL DE DEPOSITOS |
| Bank Address: AVENIDA JOAO XXI 63, LISBON 1000-300 PORTUGAL |