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| Please email or fax to Organizing Committee at:echbolognatolmezzo2019@gmail.com |
| FIREARM AND AMMUNITION FORM | Please return by | to Organizing Committee |
| Please fill out and sign this form and fax it to the Organizing Committee.Please use one form for each athlete. | 14 JUL 2019 |  |
|  |
| information |
| family name |  | first name |  |
| country |  | nationality |  |
| date of birth |  | place of birth |  |
| residential address |  |
| passport number |  | place of issue |  | date of expiry |  |
|  |  |  |  |  |  |
| for European Certificate holders’: |
| EFC number | date and place of issue | Date of expiry |
|  |  |  |
|  |
| firearms |
| Model | manufacturer | serial number | gauge / caliber |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |
|  | spare parts | manufacturer | quantity |
| barrels |  |  |  |
| stocks |  |  |  |
|  |
| ammunition |
| Quantity | manufacturer | gauge / caliber |
|  |  |  |
|  |  |  |
|  |  |  |
| Note:  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| Date |  | Signature of Athlete |  |