

Please e-mail to: psachnashootingclub@gmail.com

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| VISA SUPPORT FORM | Please return by | 24 May 2023 |
| name of federation |  | nation |  |
| contact person |  | phone number |  |
| e-mail address |  | fax number |  |
|  |
| no | family name | first name | date of birth | passport number | issue on | issue by |
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| ORGANIZING COMMITTEE |
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