

SOUTH AUSTRALIA INTERNATIONAL 2019



12-15 SEPTEMBER
ADELAIDE, AUSTRALIA



VISA REQUEST FORM

MEMBER ASSOCIATION (Country):

No.	FAMILY NAME (on passport)	GIVEN NAMES (on passport)	GENDER	NATIONALITY	PASSPORT NUMBER	EXPIRY DATE	DATE OF BIRTH	ROLE (player, coach, etc)
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								

Notes:

1. Member associations requiring visa to enter Australia please complete the above form.
2. We will forward an official invitation letter for your visa application.

Please return this form by 21st August 2019 to:

Mr Simon Oaten

Email: ogatense@gmail.com

Telephone: +61 434624810