



COUPE DU MONDE
D'ESCRIME
VANCOUVER
FENCING WORLD
CUP

VISA APPLICATION FORM

COUNTRY: _____

Contact at the national federation:

Last name: _____ First name: _____

Function: _____ Phone: _____ Fax: _____

E-mail: _____

For each member of your delegation traveling to Canada, please provide the following information:

<i>Last name(s) (as written in the passport)</i>	<i>First name(s) (as written in the passport)</i>	<i>Nationality</i>	<i>Passport Number</i>	<i>Expiration date (dd-mm- yyyy)</i>	<i>Function (Athlete, Coach, Medical, Referee, etc.)</i>	<i>City of visa application</i>

Please send the completed form by email to: ed@fencing.ca