|  |
| --- |
| **EXTRA PRACTICE ICE** |
|  |  |  |  |  |
|  |  |  |  |  |
| Please, fill in with type or write with capital letters |
|  |  |  |  |  |
| ISU Member: |  |
| Name of the Team: |  |
| Reference E-mail: |  |
| Reference Phone: |  |
| Team Leader: |  |
| Team Manager: |  |
|  |  |  |  |  |
| The fee for the extra practice ice is **60,00 EUR** for a block of 15 minutes. |
|  |  |  |  |  |
| **In case of too many requests, the Organizing Committee reserves right to limit the number of blocks.** |
|  |  |  |  |  |
| **REQUESTED EXTRA PRACTICE ICE:** |
|  |  |  |  |  |
| **Day** | **Date** | **Extra Practice Ice** | **Ice Time** | **Number of blocks** |
| Monday | April 1, 2024 | 07:00 – 23:00 |       |       |
| Tuesday | April 2, 2024 | 07:00 – 23:00 |       |       |
| Wednesday | April 3, 2024 | 07:00 – 23:00 |       |       |
|  |  |  | **TOTAL blocks:** |       |
|  |  |  | **PRICE for block:** | **60,00 €** |
|  |  |  | **TOTAL in EUR:** |      **€** |
|  |  |  |  |  |
| All requests will be reviewed accordingly to ice rink availability and receiving order of entries. |
|  |  |  |  |  |
| **For additional extra practice ice in other days preceding competition, please contact Organizing Committee.** |
|  |  |  |  |  |
| **Return to:****Organizing Committee** **Croatian Skating Federation, Trg K. Cosica 11, HR-10000 Zagreb, Croatia** |
| **E-mail: wsysc2024@croskate.hr** |