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| **ISU Member Federation:** |  |

\*One for each person

\*Please attach a photocopy of the passport which shows applicant’s full name.

|  |  |  |  |
| --- | --- | --- | --- |
| <Passport Information> | | | |
| Surname: | | Given Name: | |
| Sex: Male Female | Date of Birth: (D)       / (M)       / (Y) | | (Age:       ) |
| Passport Number: | | |  |
| Nationality: | | Date of Expiry: | |
| <Function> | | | |
| Competitor Judge Team Leader Coach Doctor Physiotherapist Official Other (      ) | | | |
| <Flight Information> | | | |
| Arrival in Japan | | Departure from Japan | |
| Date of Arrival in Japan: (D)       / (M) | | Date of Departure from Japan: (D)       / (M) | |
| From: | | To: | |
| Flight Number: | | Flight Number: | |
| <Contact Information> | | | |
| Contact Person: | | E-mail: | |
| Tel : | | Fax: | |
| <Shipping Address> (P.O.Box is not accepted.) | | | |
| Receiver: | | E-mail: | |
| Street, Number, Room: | | City: | |
| Post Code / ZIP Code: | | (Country) | |
| Tel: | | Fax: | |

Applicant is going to apply for his / her entry visa at:

　Embassy of Japan in

　Consulate-General of Japan in

|  |  |
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| ISU Member Federation: |  |
| Date, Signature: |  |