

2025 CMAS XXXIV World Championship Spearfishing – Men 2025 CMAS III World Championship Spearfishing – Women

ANNEXES for REGISTRATION.

ANNEX 1 INITIAL ENTRY FORM

Complete and submit by email before June 15th, 2025 to:

- CMAS Sports Operation Manager <a href="mailto:sport.cmas.org
- <u>cbpds@cbpds.org.com.br</u> Brasilian Confederation of Fishing and Underwater Sports

COUNTRY	
MEN / WOMEN (mark one)	
FEDERATION	
E-MAIL	
NUMBER OF PARTICIPATING ATHLETES +	
RESERVATIONS / SUBSTITUTES	
NUMBER OF ADDITIONAL PEOPLE IN THE	
DELEGATION OFFICIAL	
NEED FOR BOATS	
(NUMBER)	
DATE:	2025

Countries that are not classified and wish to participate must register before June 15th , 2025, to enhance their possible participation.

Signature and stamp

ANNEX 2

PROVISIONAL REGISTRATION FORM

Complete and email before July 15th, 2025 to:

- CMAS Sports Operation Manager </a href="mailto:sport.cmas.org"></a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org"></a href="mailto:sport.cmas.org"></a href="mailto:sport.cmas.org"></a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org"></a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org"/mailto:sport.cmas.org"/>mailto:sport.cmas.org</a href="mailto:sport.cmas.org"/>>
- <u>cbpds@cbpds.org.com.br</u> Brasilian Confederation of Fishing and Underwater Sports

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FEDERATION	
MALE / FEMALE TEAM	
TELEPHONE	
E-MAIL	
11 1 1	

11.50	NAME AND SURNAME	BIRTH DATE	DNI OR PASSPORT	CMAS LICENSE
1st ATHLETE				
participant	SI/A			
2nd ATHLETE	5111			
participant	111			411
3rd ATHLETE	• // / / / / / / /		1 * 1 KI	
participant				
1st RESERVE				
2nd RESERVE				
3rd RESERVE	2 \dots	/	$I \leq I \leq 1$	
CAPTAIN	Tel VIII			11
HEAD OF	124 V V V		87 (175	<i>F11</i>
DELEGATION	$\sqrt{2}$	アント		
DOCTOR /	N 040	61161		//
FISIOTERAPIST	N 1986	RTOS ?		<u> </u>

LIST OF OTHER MEMBERS OF THE DELEGATION TO BE ACCREDITED:

INDICATE THE CHOSEN OPTION:

		Option A			Option B	
Number of athletes per NF	S Half-board registration includes 4 nights + Boat + Opening Dinner + Registration without Closing Dinner and event souvenir		accommodation includes bo dinner and event souve	at + opening dinner + closing nir		
	1st pay.	2nd pay.	Total	1st pay.	2nd pay.	Total
1	€1,182	€1,182	€2,363	€1,057	€1,057	€2,113
2	€1,515	€1,515	€3,030	€1,265	€1,265	€2,530
3	€1,848	€1,848	€3,697	€1,473	€1,473	€2,947
4	€2,003	€2,003	€4,007	€1,523	€1,523	€3,047
5	€2,158	€2,158	€4,317	€1,573	€1,573	€3,147
6	€2,313	€2,313	€4,627	€1,623	€1,623	€3,247

Athletes with their own boats will receive a discount of €200 per boat.

DISCOUNT	Choose option
200 euros	
400 euros	
600 euros	
	400 euros

Shipments requested from the Organization:

NUMBER OF SHIPMENTS	Choose	
PROVIDED BY LOC	option	
0 vessels		
1 vessels		
2 vessels		
3 vessels		

Registration of other members of the official team (Capitan , Chief Delegate, Doctor): with accommodation (SEE TABLE) / without accommodation: €200 per person.

No. of Concession, Name

Values for Managers an	d other members of the delegation	2
4 nights in a 4- <mark>s</mark> tar ho	otel, half board + Closing dinner	l
Rooms		2
Rooms Single Room		2
	4 Nights Per Room	r V

A basic alternative accreditation fee for "Other delegation members" = €60 * number of members.

Find proof of 1st payment attached.

Date ___

2025

(signature and stamp)

ANNEX 3

FINAL REGISTRATION FORM

(CHANGES TO THIS REGISTRATION ARE NOT ALLOWED)

Complete and email before September 1st, 2025 to:

- CMAS Sports Operation Manager </a href="mailto:sport.cmas.org"></a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org"></a href="mailto:sport.cmas.org"></a href="mailto:sport.cmas.org"></a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org"></a href="mailto:sport.cmas.org"></a href="mailto:sport.cmas.org"></a href="mailto:sport.cmas.org"></a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org"></a href="mailto:sport.cmas.org"></a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org">mailto:sport.cmas.org</a href="mailto:sport.cmas.org"/mailto:sport.cmas.org"/
- <u>cbpds@cbpds.org.com.br</u> Brasilian Confederation of Fishing and Underwater Sports

FEDERATION	
MEN / WOMEN (mark)	CONCAU BILL
TELEPHONE	
E-MAIL	
11 1 1 1 2 1 3	

11-202/	NAME AND SURNAMES	BIRTH DATE	DNI OR PASSPORT nº	CMAS LICENSE
1st ATHLETE				
participating				
2nd ATHLETE			1 22 L Y	<u> </u>
participating				
3rd ATHLETE	211		$I \geq I$ WH	
participating				V 11
1st RESERVE				211
2nd RESERVE				11
3rd RESERVE	$1 > 2c^{-1}$	1811		//
CAPTAIN	N 25820	Pros > /		7
HEAD OF				Not required
DELEGATION			1 1	_
DOCTOR /				Not required
FISIOTERAPIST			-//	

LIST OF OTHER DELEGATION MEMBERS TO BE ACCREDITED:

ATHLETES: INDICATE THE CHOSEN OPTION :

		Option A			Option B	
Number of athletes per NF	Registration includes 4 nights Hotel half board + Boat + Opening Dinner + Closing Dinner and event souvenir		Registration without accommodation includes boat + opening dinner + closi dinner and event souvenir		opening dinner + closing	
	1st payment.	2nd payment.	Total	1st payment.	2nd payment.	Total
1	€1,182	€1,182	€2,363	€1,057	€1,057	€2,113
2	€1,515	€1,515	€3,030	€1,265	€1,265	€2,530
3	€1,848	€1,848	€3,697	€1,473	€1,473	€2,947
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5	€2,158	€2,158	€4,317	€1,573	€1,573	€3,147
6	€2,313	€2,313	€4,627	€1,623	€1,623	€3,247

Athletes with their own boats will receive a discount of €200 per boat.

NUMBER OF OWN / RENT SHIPMENTS	DISCOUNT	Choose option
1 vessel	200 euros	1027
2 vessels	400 euros	N 19 V
3 vessels	600 euros	N 7 1

Shipments requested from the Organization:

NUMBER OF SHIPMENTS PROVIDED BY LOC	Choose option
0 vessels	
1 vessels	
2 vessels	
3 vessels	
	No. of Concession, name

Registration of other members of the official team (Captain, Chief Delegation, Doctor):

- without accommodation: €200 per person. Number of members =
- with accommodation (SEE next TABLE).
 - Number of members =
 - Number and type of rooms = ...singledoubletriple.

Values for other official members, other members of the delegation, friends 4 nights in a 4-star hotel, half board + Closing dinner	
Rooms	4 Nights Per Room
Single Room	€431
Double Room	€505
Triple Room	€690

A basic alternative accreditation fee for "Other delegation members" = €60 * number of other members.

Find proof of 2nd payment attached.

