**ANNEX 3**

**COMPETITORS LIST FORM (Before 30th May 2025)**

Please complete this form and send it to CMAS HQ and Organising Committee by e-mail: [chiosFS2025@koe.org.gr](mailto:chiosFS2025@koe.org.gr)

| Country | |  | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Federation | |  | | | | | | | |
| Club | |  | | | | | | | |
| Competitors | | Masters Men | |  | | Masters Women | |  | |
| Officials | | Men | |  | | Women | |  | |
| n. | NAME | | FIRST NAME | | Athlete, Trainer, Delegation Chief, Doctor, Judge, Other | | Passport number | Male Master | Female Master |
| 1 |  | |  | |  | |  |  |  |
| 2 |  | |  | |  | |  |  |  |
| 3 |  | |  | |  | |  |  |  |
| 4 |  | |  | |  | |  |  |  |
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| 12 |  | |  | |  | |  |  |  |
| 13 |  | |  | |  | |  |  |  |
| 14 |  | |  | |  | |  |  |  |
| 15 |  | |  | |  | |  |  |  |

| ARRIVAL | Date: | |  | | Time | |  | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Airport |  | | | | Flight No. | |  | |
| DEPARTURE | Date: | |  | | Time | |  | |
| Airport |  | | | | Flight No. | |  | |
|  | |  | | Date | | | |
|  | | (President Signature / stamp) | |  | | (Full name in block letters) | |
|  | |  | |  | |  | |

Copy if necessary and number the pages