



Aïkido Mouvement Evasion



REGISTRATION FORM - EUROPEAN AIKIDO MEETING - 31st MAI - 2nd JUNE 2024
Salle des Sports, 13 route d'Yzeron - 69510 THURINS

COURSE

Name : _____ First Name : _____

E-mail : _____ @ _____

Tel : _____

Club : _____

► Complete the boxes :

			Montant
FULL EVENT		(55€)	
Friday	20h00 - 22h00	(15€)	
Saturday	9h00 - 12h00	(20€)	
	15h00 - 18h00	(20€)	
Sunday	9h30 - 11h30	(15€)	
TOTAL			

① half-price for the unemployed or students - proof required

I wish to take part in this meeting and attest that I'm insured for Aikido practice (valid medical certificate - less than a year).

Date and signature :

SATURDAY EVENING/SUNDAY LUNCHTIME

► Tick the appropriate box/boxes :

Saturday evening (20€) Number : ____

Sunday picnic lunch (5€) Number : ____

Course	€
Meal Saturday evening	€
Picnic Sunday lunch	€
Total	€

► I would like accomodation : Private home
Hotel

Please return completed form, if possible by e-mail to : contact@ame-aikido.fr

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