

ENROLMENT FORM
6. INTERNATIONAL FIREMEN'S RACE
3. EURO CUP FOR PROFESSIONAL FIREMEN
Mali Lošinj, 02.04.2016.



Name :						
Surname :						
Date of Birth :						
Sex:	M			F		
Adress:						
Postal Code :						
City:						
Country:						
Phone:						
Fax:						
e-mail:						
Shirt Size:	S	M	L	XL	XXL	

Professional Fireman:	YES	NO
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Fire Station:	
Person Responsible /Station Commander:	
Signature:	
Stamp:	
Date:	



Enrolment Form to be sent by e-mail: miroca28@net.hr