



**CZECH AEROBIC OPEN 2026 Prague, (CZE)**

**23rd – 26th April, 2026**

Form to be sent to:

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| **Organizing Committee / Host Federation** |
| **Czech Gymnastics Federation**  **Zátopkova 100/2, 160 17 Praha 6**  **Tel.: +420 242 429 260**  **aerobic@gymfed.cz** |

**Deadline: 23rd February, 2026**

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| **VISA REQUEST Form** |

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| **Federation** |  | **Contact person:** |  |
| **Phone:** |  |
| **E-mail:** |  |

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| **LAST NAME,**  **First name** | **Function** | **Gender**  **M/F** | **Date of birth**  dd.mm.yyyy | **Citizenship and**  **passport N°** | **Passport expiry date** | **Arrival date** | **Departure date** | **City**\* |
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*\* city where the visa application support letter must be sent to*

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| **Place and date** | **Seal of the NF** | **NF authorised signature** |
|  |  | Signature of the President or Secretary General of the participating FIG affiliated NF |
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