

BOWLING EUROPEAN CORPORATIVE CHAMPIONSHIPS



ENTRY FORM (Please use BLOCK CAPITALS only)

COUNTRY: **ITALY**

NAME OF COMPANY and TEAM NAME: **TECHNIP ITALY**

BUSINESS ADDRESS: **V.le Catello della Magliana 68 - 00148 Rome**

NAME, ADDRESS AND TELEPHONE NUMBER OF THE PERSON RESPONSIBLE FOR THE TEAM (TEAM CAPTAIN OR TEAM MANAGER):

FOUR PERSON TEAM EVENT		PREFERRED BOWLING SQUAD (A, B, C ETC)		Family?	Senior?
PLAYERS NAMES (IN ORDER OF INITIAL PLAY)		Male or Female	NATIONAL BOWLING FEDERATION CARD NUMBER	Wife Child Husband	60+
First Name / Prénom	Last Name / Nom de Famille	M/F		W/C/H	Y
1 CARMELINA	GIUFFRIDA	F	AA6537	W	Y
2 STEFANO	SCIASCIA	M	AA3674		
3 GIUSEPPE	SCIASCIA	M	AA3669		Y
4 SCIASCIA	FRANCESCO	M	AA3997		
5 (RESERVE)					

LADIES DOUBLES TEAM EVENT		PREFERRED BOWLING SQUAD (A, B, C ETC)		Family?	Senior?
PLAYERS NAMES (IN ORDER OF INITIAL PLAY)		Male or Female	NATIONAL BOWLING FEDERATION CARD NUMBER	Wife Child Husband	60+
First Name / Prénom	Last Name / Nom de Famille	M/F		W/C/H	Y
1		F			
2		F			
3 (RESERVE)		F			

MIXED DOUBLES TEAM EVENT		PREFERRED BOWLING SQUAD (A, B, C ETC)		C	Family?	Senior?
PLAYERS NAMES (IN ORDER OF INITIAL PLAY)		Male or Female	NATIONAL BOWLING FEDERATION CARD NUMBER	Wife Child Husband	60+	
First Name / Prénom	Last Name / Nom de Famille	M/F		W/C/H	Y	

MENS DOUBLES TEAM EVENT		PREFERRED BOWLING SQUAD (A, B, C ETC)		Family?	Senior?
PLAYERS NAMES (IN ORDER OF INITIAL PLAY)		Male or Female	NATIONAL BOWLING FEDERATION CARD NUMBER	Wife Child Husband	60+
First Name / Prénom	Last Name / Nom de Famille	M/F		W/C/H	Y
1		M			
2		M			

FACTS SHOWN ABOVE ARE CORRECT TO THE BEST OF MY KNOWLEDGE

Date: **22/02/2023**

Country Representative Name Address

Signature: **TEN**

fisb FEDERAZIONE ITALIANA SPORT BOWLING
 Commissione Italiana Aziendale Coordinatore