PLAYER & TEAM OFFICIAL ACCREDITATION FORM

Please complete and return this form to tecnicabadguate@gmail.com , gt.tecnica2023@gmail.com , tutoras.tec.fnbg@gmail.com , direcciontecnica@badminton.com.gt , informacionpublica@badminton.com.gt Please fill up the form and send Photo as per requirement. Please take note that we will not accept Selfie Photo. Please refer to Photo sample below.

Please type clearly in CAPITAL LETTERS.

Name of Member Association:			
Contact Person:			
MOBILE NUMBER:		PHONE NUMBER:	
E-MAIL:			

No.	FULL NAME	Official Position (Player, Coach, Physiotherapist, Nutritionist, Masseur, etc.)
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SAMPLE :

			
Kevin Cordón GUATEMALA	**NAME COUNTRY**	**NAME COUNTRY**	**NAME COUNTRY**

NAME COUNTRY	NAME COUNTRY	NAME COUNTRY	NAME COUNTRY
NAME COUNTRY	NAME COUNTRY	NAME COUNTRY	NAME COUNTRY
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