



# FINAL AGREEMENT

ANNEX 2a

TO BE RETURNED BEFORE 1<sup>st</sup> July 2017:

## DEFINITIVE TRAVEL INFORMATION

**TO: Organizing Committee CISM BeachCup**  
German Armed Forces Sports School  
CISM-Office

**Address:** Dr. Rau-Allee 32  
48231 Warendorf/Germany

**Tel:** +49 2581 9411 4100 o. 4102

**Fax:** +49 2581 9411 1111

**E-Mail:** SportSBwCISM@bundeswehr.org

**Copy: German Delegation to CISM**  
German Joint Support Service Headquarters  
Department of Sport and Physical Fitness

**Address:** Fontainengraben 150  
53170 Bonn/Germany

**Tel:** +49 228 5504 2751

**Fax:** +49 228 5504 2714

**E-Mail:** gedelegationcism@bundeswehr.org

COUNTRY

MEANS OF TRANSPORT

	DATE	TIME	PLACE	FLIGHT NO
ARRIVAL				
DEPARTURE				

### YOUR CONTACT

Rank/Name	
Phone/Mobile	
Fax	
E-Mail	

DATE	SIGNATURE CHIEF OF DELEGATION	RANK/NAME



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ANNEX 2b

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## COMPOSITION OF THE MISSION

COUNTRY

FUNCTION	NO	RANK	FIRST NAME	LAST NAME	(M/F)
Team Captain	1				
Coach	1				
Trainer/Physician	1				

NO	FUNCTION	TEAM	RANK	FIRST NAME	LAST NAME
1	Male Athlete	1			
2					
3		2			
4					
5		3			
6					
7	Female Athlete	1			
8					
9		2			
10					
11		3			
12					

In strict compliance with applicable CISM Regulations (Chapter VII, art: 7.22), I, the undersigned Chief of Delegation, hereby officially confirm that all athletes representing my nation in the CISM event are on active duty in my nation's Armed Forces. I understand that sanctions may be imposed against my nation, my mission, my team, individual athletes, or myself for violation of this provision (CISM Regulations Chapter I, Art: 1.12).

DATE	SIGNATURE CHIEF OF DELEGATION	RANK/NAME