**Form 8**

**TRAVEL INFORMATION**

**Please return this Form at latest 16 Fevrier 2024**

to Organizing Committee: elisabethcognet@gmail.com, sylvie.coupez@wanadoo.fr

| **Team Name** |  |
| --- | --- |
| **ISU Member** |  |
| **Team Manager / Contact Person** |  |
| **Mobile Phone** |  |
| **E-Mail** |  |

| **Arrival** |
| --- |
| We will travel by: | Bus ❑ Train ❑ Plane ❑ |
| Arrival Date: |  |  | Arrival Time: |  |
| Flight/Train Number: |  |  | Airport: |  |

| **Departure** |
| --- |
| We will travel by: | Bus ❑ Train ❑ Plane ❑ |
| Departure Date: |  |  | Departure Time: |  |
| Flight/Train Number: |  |  | Airport: |  |

| **Date**  | **Signature**  |
| --- | --- |