

ΕΛΛΗΝΙΚΗ ΟΜΟΣΠΟΝΔΙΑ ΜΠΡΙΤΖ

ΦΕΙΔΙΙΙΙΙΙΔΟΥ 30, 115 27 ΑΘΗΝΑ, τηλ. 210 748 0400

http://www.hellasbridge.org email: eom.manager@hellasbridge.org eom.secretary@hellasbridge.org

HBF REGISTRATION APPLICATION (Please fill in fields 1-14)

(The application will be rejected if any field is blank, if not properly signed and/or is not accompanied by a photograph and ID/Passport Copy.

Social Security and Tax ID fields, only applicable to Residents)

APPLICANT INFO

| (1) Surname : | | | | | | | |
|---|-------|---|---|--|---|--|--|
| (2) Name : | | | | | | | |
| (3) Father's name : | | | | | | | |
| (4) Date of Birth (dd/mm/yyyy) : | | | | | | | |
| (5) ID/Passport No. : | | | | | | | |
| (6) Occupation : | | | | | | | |
| (7) Social Security (AMKA) No. If Applicable: | | | | | | | |
| (8) Tax ID No. If Applicable: | | | | | | | |
| Residence Info | | | | | | | |
| (9) Address : | | | | | | | |
| (10) City : | | | | | | | |
| (11) Country: | | | | | | | |
| (12) Postcode : | | | | | | | |
| Contact Info | | | | | | | |
| (13) Telephone No. | Work: | | | Home: | Mobile: | | |
| (14) Email Address | | | · | | | | |
| | | | | | | | |
| Club Name | | | | Club Stamp and Signature | | | |
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| •••••• | | | | | | | |
| • I am a bridge student, certified by : | | | | | | | |
| HBF Code | Sex | М | F | | ot a member of another Bridge Sport os from official games being used for | | |
| Registration Date | | | | info being used by the Club and that neither the Club or HBF wi | the game of Bridge, 3) Consent to my contact d by HBF in order to contact me, 4) Aknowledge ill release info provided to any third parties, so requested by Greek authorities. | | |
| Receipt No. | | | | Th | e Applicant ¹ | | |
| | | | | | (Signature) | | |

 $^{^{1}}$ For applicants younger than 18 Years Old, a parent or legal guardian must sign the application.