



TRAVELLING DETAILS INDIVIDUAL REGISTRATION

Form to be returned duly filled in not later than Wednesday 8th of June

COUNTRY: _____

NAME PLAYER: _____

NAME OFFICIAL: _____

DATE OF ARRIVAL: _____ AIRPORT: _____

TIME: _____

FLIGHT N°: _____

COMING FROM: _____

NUMBER OF PEOPLE: _____

DATE OF DEPARTURE: _____ AIRPORT: _____

TIME: _____

FLIGHT N°: _____

Date: _____

Transportation from and to Brussels airport

To be sent to :
info@golfbelgium.be

E. info@golfbelgium.be

T. +32 2 672 23 89

F. +32 2 675 45 19

Bld. Louis Schmidt 87/6

1040 Brussels

www.golfbelgium.be