**Form 11**

**SUMMARY OF FEES**

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

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

| **Team Name**  |  |
| --- | --- |
| **ISU Member** |  |

| **Inscription Competition****(Saturday)** | **400.00 €** |  **= 400.00 €**  |
| --- | --- | --- |
| **Total Extra Practice****Form 3** | **120.00 € per 30 minutes block** |  **= \_\_\_\_\_\_\_\_\_\_\_€** |
| **Total Meal Reservation****Form 9** |  |  **= \_\_\_\_\_\_\_\_\_\_\_€** |
| **Total Ticket Reservation****Form 10** |  |  **=\_\_\_\_\_\_\_\_\_\_\_€** |
|  |
| **Total amount** |  |  **= \_\_\_\_\_\_\_\_\_\_\_€** |

This form must be returned together with the total payment.

# **CREDIT CARDS ARE NOT ACCEPTED**

| Beneficiary | ASSOC. MMM SPORTS DE GLACE |
| --- | --- |
| Bank | CREDIT AGRICOLE |
| IBAN | FR76 1350 6100 0085 1132 7242 815 |
| BIC (SWIFT-Code) | AGRIFRPP835 |
| Remark | SYS Mixed Age Trophy 2024 |
| Please, specify name of the Team |

**If the organizer’s account is debited of any commission and/or charges for bank transactions, these will have to be paid in cash at the time of accreditation. The amount to be paid will be notified in advance by mail.**

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