Visa Application Form

Please complete and email this form to [admin@nzbadmintonopen.com](mailto:admin@nzbadmintonopen.com) no later than **Tuesday, 7 April 2020.** Please allow up to two days for a reply.

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| Member Association: | | Contact Person: |
| Phone Number: | Mobile Number: | Email: |

Please complete all categories, otherwise we will be unable to issue the invitation letter.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **No.** | **Mr/Ms** | **Surname** | **First Name** | **Passport No.** | **Expiry Date** | **Date of Birth** | **Nationality** | **Occupation / Position** |
| 1 |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |