**SATHIO GROUP AUSTRALIA OPEN 2023**

**SYDNEY AUSTRALIA 1-6 AUGUST**

**VISA REQUEST FORM**

|  |  |  |  |
| --- | --- | --- | --- |
| **MEMBER ASSOCIATION Country:** |  | **CONTACT NAME In full:** |  |
| **CONTACT Phone number:** |  | **CONTACT Email address:** |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **No.** | **FAMILY NAME**  **(on passport)** | **GIVEN NAMES**  **(on passport)** | **GENDER** | **NATIONALITY** | **PASSPORT**  **NUMBER** | **EXPIRY**  **DATE** | **DATE**  **OF**  **BIRTH** | **ROLE**  **(player, coach, etc)** |
| **1.** |  |  |  |  |  |  |  |  |
| **2.** |  |  |  |  |  |  |  |  |
| **3.** |  |  |  |  |  |  |  |  |
| **4.** |  |  |  |  |  |  |  |  |
| **5.** |  |  |  |  |  |  |  |  |
| **6.** |  |  |  |  |  |  |  |  |
| **7.** |  |  |  |  |  |  |  |  |
| **8.** |  |  |  |  |  |  |  |  |
| **9.** |  |  |  |  |  |  |  |  |
| **10.** |  |  |  |  |  |  |  |  |

**Notes:**

1. Member associations requiring visa to enter Australia please complete the above form.

2. We will forward an official invitation letter for your visa application.

Please return this form as soon as possible or by Tuesday 4th July 2023 to:

Ms Kathy Fong

Email: secretary@ausbadmintonopen.com

Telephone: +61 404 613 456