**CENTURY INSURANCE Saipan International 2025**

**SAIPAN, NORTHERN MARIANA ISLANDS**

**AUGUST 12-16, 2025**

**TRANSPORT REQUEST FORM**

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

|  |  |  |
| --- | --- | --- |
| **GROUP 1** | **ARRIVAL** | **DEPARTURE** |
| DAY/DATE/TIME: |  |  |
| FLIGHT NUMBER: |  |  |
| TOTAL NO: OF PERSONS: |  |  |
| GROUP LEADER (NAME & WHATS APP NUMBER) |  |

|  |  |  |
| --- | --- | --- |
| **GROUP 2** | **ARRIVAL** | **DEPARTURE** |
| DAY/DATE/TIME: |  |  |
| FLIGHT NUMBER: |  |  |
| TOTAL NO: OF PERSONS: |  |  |
| GROUP LEADER (NAME & WHATS APP NUMBER) |  |

**Notes:**

**If you are playing the CROWNE PLAZA Northern Marianas Open 2025 as well as this tournament you only need to submit one transport form, due 25 July 2025**

1. Transport pick up available for participants arriving at the Saipan International Airport

2. Transport is provided **ONLY** for participants staying at the official accommodations (Crowne Plaza Resort Saipan).

3. Please notify organiser if above flights details have changed prior to arrival.

Please return this form by **Friday 1 August 2025** to:

Please return this form to: Event Director - Roselyn Monroyo

Email: roselynmonroyo@gmail.com

If this form is not received by **1 August**, airport transfers cannot be provided

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