**MAXX NORTH HARBOUR INTERNATIONAL 2025**

**AUCKLAND, NEW ZEALAND**

**1-5 OCTOBER**

|  |  |
| --- | --- |
| **Member Association Country:****Contact Phone Number:****Contact Name (full):****Contact Email address:** | INSERTINSERTINSERTINSERT |
| **Notes** | 1. Member associations requiring a Visa to enter New Zealand please complete the above form and return to Badminton North Harbour email: lisa@bnh.org.nz.
2. We will forward the official invitation letter for your visa application to your contact email address the next business day after receipt
3. Please allow sufficient time for you visa application. We recommend applying at least 30 days prior to your planned travel dates
 |
| **Contact Details** | Please return this form by Wednesday 3 September 2025 to: Lisa Schmidt: lisa@bnh.org.nz  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |  |  |  |  |  |  |  |  |

**VISA REQUEST FORM**