

Entry Form Super Star Winter

2024 - 2025



Team Name:

Team Owner Name:

Address:

Country:

Phone:

Email

Team's Agent :

	Team A
1	
2	
3	
4	
5	
6	

	Team B
1	
2	
3	
4	
5	
6	

	Team C
1	
2	
3	
4	
5	
6	

	Team D
1	
2	
3	
4	
5	
6	

I have read and accept all the rules and conditions of the participants regulations regarding 2023-2024 season, is available at www.columbodromsuperstar.ro

Payment option	Amount
Bank Transfer to Super Star:	
Payment to Transporter:	
Payment to Agent:	

Team's Owner Signature: