

5th ISLAMIC SOLIDARITY GAMES

KONYA 2021 S. ISLAMI DAYANISMA OYUNLARI Sthi ISLAMIC SOLIDARITY GAMES

20th - 29th AUGUST, 2021 KONYA, REPUBLIC OF TURKEY

PARTICIPATION FORM (PLEASE TICK) ☑

| | SPORT | | MEN | WOMEN |
|-----|--------------------|----------|-----|-------|
| 1. | ATHLETICS | | | |
| 2. | ARCHERY | | | |
| 3. | BASKETBALL (3 x 3) | | | |
| 4. | BOCCE | | | |
| 5. | CYCLING | ROAD | | |
| | | TRACK | | |
| 6. | FENCING | | | |
| 7. | FIELD HOCKEY | | | |
| 8. | FOOTBALL | | | |
| 9. | GYMNASTICS | ARTISTIC | | |
| | | AEROBIC | | |
| 10. | HANDBALL | | | |
| 11. | JUDO | | | |
| 12. | KARATE | | | |
| 13. | KICKBOXING | | | |

| | SPORT | | MEN | WOMEN |
|-----|---------------------|-----------|-----|-------|
| 14. | SHOOTING | | | |
| 15. | SWIMMING | | | |
| 16. | TABLE TENNIS | | | |
| 17. | TENNIS | | | |
| 18. | TAEKWONDO | | | |
| 19. | VOLLEYBALL | | | |
| 20. | WEIGHTLIFTING | | | |
| 21. | | FREESTYLE | | |
| | WRESTLING | GRECO | | |
| 22. | ABA WRESTLING | | | |
| 23. | TRADITIONAL ARCHERY | | | |
| 24. | PARA-ATHLETICS | | | |
| 25. | PARA-ARCHERY | | | |
| 26. | PARA-TABLE TENNIS | | | |
| 27. | PARA-SWIMMING | | | |

| Please indicate how many athletes you | | | | | | |
|---------------------------------------|-----|------|----|-----|-------|------|
| intend | to | send | to | the | Konya | 2021 |
| Games: | | | | | | |
| • Less t | han | 10 | | | | |
| | | | | | | |

• More than 10 but less than 50

• More than 50 but less than 100 $\hfill \Box$

| • | More | than | 100 |
|---|------|------|-----|
| | | | |

Please note that the **<u>Financial Obligations</u>** of participating NOCs as per the ISSF Games Basic Regulations include:

1. NOCs pay for the Athletes and Team Officials' Flights

to Konya (inclusive of equipment transfers).

2. NOCs pay US 50 $\$ per day for each Athlete and Team

Official staying in the Athletes Village.

Please complete and return this form to <u>info@olimpiyat.org.tr</u> by 31st July 2020 at the latest.

Title, Name and Surname of the President or Secretary General filling this form:

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| Name of the Country: | | NOC Stamp |
|---------------------------|--|-----------|
| Signature: | | |
| Mobile Phone: | | |
| Office Telephone: | | |
| Related E-mail Addresses: | | |
| 1. | | |
| 2. | | |