



REGATE DI PRIMAVERA

▶ P O R T O F I N O ◀

ACCREDITATION FORM

Surname: _____

Name: _____

Publication: _____

Country: _____

Mobile: _____

E-mail: _____

I WILL BE ATTENDING ON:

THURSDAY
04 May

FRIDAY
05 May

SATURDAY
06 May

SUNDAY
07 May

Please fill in and send it to luigi.magliari@ycli.it