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|  |  |  |  |
| --- | --- | --- | --- |
| SURNAME: |  | NAME: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| SPOUSE’S SURNAME: |  | SPOUSE’S NAME: |  |

|  |  |
| --- | --- |
| CHILDREN’S NAMES AND Y.O.B.: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| COUNTRY (PASSPORT) |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| MEDICAL SPECIALIZATION: |  | SPOUSE’S IF MD: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| PHONE: |  |  |  |

|  |  |
| --- | --- |
| E-MAIL: |  |

* Registration and participation in the tennis tournament is restricted to physicians and spouses or life partners.
* Children may play a separate tournament depending on number of participants.
* Each official WMTS delegate is responsible for the qualifications of registrants from their countries.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Category | Before  March 31, 2024 | After March 31, 2024 | Number of persons | Amount in Euro |
| **Physician** | EUR 490 | EUR 550 |  |  |
| **Spouse player** | EUR 390 | EUR 450 |  |  |
| **Non playing guest** | EUR 290 | EUR 350 |  |  |
| **Junior 12-18 years** | EUR 100 | EUR 150 |  |  |
| **Child < 12 years** | free | free |  |  |
|  |  |  | TOTAL EUR |  |

**REGISTRATION FEE INCLUDES**: tennis tournament, scientific sessions, welcome reception, national evening, awards ceremony, farewell dinner, bus transportation, WMTS contribution fee.

