



75th ANNIVERSARY D-DAY INVASION OF NORMANDY – Registration form

Main Participant (Group leader)

Your Name	First name	Email address
Address - Street	Street 2	
City	Postcode - Zip Code	Country
Phone number	Birthdate (MM-DD-YY)	
Passport number	Country of issue	Valid till (MM-DD-YY)

Additional Participants:

#	Name	First name	Birthdate (MM-DD-YY)	Passport number	Country of issue	Valid till (MM-DD-YY)
2						
3						
4						
5						

Additional Information:

Club Group (optional)	Website (optional)	Group leader name (optional)
Additional information (optional):		

Select method of payment (details will be sent to main participant) :

- Bank transfer
- Paypal

Standard terms and conditions

I acknowledge having read the standard terms and conditions for the event participation organized by BAIV and agree to respect it along with the "Good Conduct Rules" which will be implemented by the French authority. The participant is obliged to ensure the good performance and good order of the camp as well as compliance with this Regulation. The fact of staying on the ground organized by BAIV implies unconditional acceptance of these rules and the commitment to comply.