

## **LOCATION FORM**

## UNANNOUNCED / OUT-OF-COMPETITION DOPING CONTROL PROGRAMME

Please fill in the form with capital letter and return to: FINA OFFICE

Avenue de l'Avant-Poste, 4

1005 Lausanne, Switzerland www.fina.org

		SWIMMER			DATE:			
			<u> </u>			A1E		
Nationality:			Sex:	Club / Team :				
First Name:			l	Last Name:				
Actua	ıl Living Add	ress:						
Postal code:			Town:	Town:				
Country:								
Phone : (area code/number) Fax : (area code/number)								
Alternate Contact: First and Last Name:  Phone (area code/number):								
PERMANENT TRAINING SCHEDULE  X. <u>Training Place 1</u> Pool's Name & Address:								
DAY	Monday	Tuesday	Training Wednesday	Time (Fron Thursday	<i>n-To)</i> Friday	Saturday	Sunday	
AM				,		,		
PM Periods when you train according to the above mentioned, should be filled in with an X on the Training Schedule								
	<u>ining Place 2</u> Name & Add	dress:						
Training Time (From-To)								
DAY	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	
AM								
DM								

Tel: +41-21-310 47 10

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