

REFEREES COURSE
PARTICIPANT'S APPLICATION FORM

Family Name	
Given Name	
For which level of Referee do you apply for?	<input type="checkbox"/> National <input type="checkbox"/> Regional <input type="checkbox"/> International Category 1 <input type="checkbox"/> International Category 2
CV of the last 4 years activity in Powerlifting attached?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Nationality	
Date of Birth	
Address	Street
	Number
	Postal Code
	City/Country
Contact Number	
Email address	
Date of submission	
NPC's Person name, Signature & Position	
NPC's Stamp	

The form must be returned **no later than 20 May 2011** to IPC Powerlifting at ipcpowerlifting@paralympic.org or by fax at +49 228 2097209