***(1/3)***

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| SEASON | 2015/2016 |

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| --- |
| **Applicant’s Details** |
| **Name & Surname:****(\*)** |  | **FISTF Code: (\*)** |  |
| **Address:****(\*)** |  | **Mobile:** |  |
| **Telephone:** |  |
| **Email:****(\*)** |  |
| **Nation:****(\*)** |  |
| **Federation Name:****(\*)** |  |

*(\*) Mandatory fields*

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| **Events Requested** |
|  | ***Tick with an ‘X’ as requested*** | ***Tick with an ‘X’ as requested******Teams Event*** |
| **Grand Prix** |  |  |
| **International Open #1** |  |  |
| **International Open #2** |  |  |
| **Satellite Tournament #1** |  |  |
| **Satellite Tournament #2** |  |  |
| **Satellite Tournament #3** |  |  |
| World Cup |  |  |
| **Champions League &****Europa League** |  |  |
|  |
| **South American Cup** |  |  |
| **World Masters** |  |  |

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*…/…* ***(2/3)***

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| **Tournament’s Details** |

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| --- | --- | --- | --- |
| Details | ***Grand Prix 1*** | ***International Open #1*** | ***International Open #2*** |
| ***Date******(\*)*** |  |  |  |
| ***Town******(\*)*** |  |  |  |
| ***Competition Manager******(\*)*** |  |  |  |
| ***FISTF Code******(\*)*** |  |  |  |
| ***Address******(\*)*** |  |  |  |
| ***Telephone*** |  |  |  |
| ***Mobile*** |  |  |  |
| ***Email******(\*)*** |  |  |  |

*(\*) Mandatory fields*

|  |  |  |  |
| --- | --- | --- | --- |
| Details | ***Satellite #1*** | ***Satellite #2*** | ***Satellite #3*** |
| ***Date******(\*)*** |  |  |  |
| ***Town******(\*)*** |  |  |  |
| ***Competition Manager******(\*)*** |  |  |  |
| ***FISTF Code******(\*)*** |  |  |  |
| ***Address******(\*)*** |  |  |  |
| ***Telephone*** |  |  |  |
| ***Mobile*** |  |  |  |
| ***Email******(\*)*** |  |  |  |

*(\*) Mandatory fields*

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*…/…* ***(3/3)***

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| --- |
| **Declaration** |
| . |

**Final Declaration:**

I have been expressly made aware of the provisions of the FISTF Handbook dealing with disclaimer of liabilities, exculpation and indemnity and, by willingly signing the present form, recognize that these provisions are fully understood and accepted.

|  |
| --- |
| **Applicant Signature** (\*) |

|  |  |  |  |
| --- | --- | --- | --- |
| ***Date*** | ***Place*** | ***Title*** | ***Signature*** |
|  |  |  |  |

*(\*) All fields mandatory*