



Application

World Shooting Para Sport Classifiers Course

Course date/location are applied for:	
Last Name:	
First Name(s):	
Digital Photograph attached?	YES NO
Scanned document(s) of Medical/Physiotherapy qualifications attached?	YES NO
Nationality:	
Date of Birth:	
Address:	
Mobile phone number:	
Email address:	

NPC Verification

All applications must be endorsed by your National Paralympic Committee:

NPC Contact Name:	
Role:	
Signature:	
NPC Stamp:	
Date:	

NOTE: All applications must be returned no later than 6 weeks prior to the relevant course to World Shooting Para Sport at ipcshooting@paralympic.org or by fax at +49 228 2097209