NOMINATION - APPLICATION FORM for INTERNATIONAL UMPIRES

Event Name :	2017 ITTF-Europe TOP 16 Cup
Location :	ANTIBES (FRA)
Start Date :	03.02.2017
End Date :	05.02.2017

Please complete the form and send to

Email address:	bisabelle@hotmail.com
Closing date:	04.12.2016

Please send form in Excel - **NOT** as PDF

Association:	
Responsible person:	
Function:	
Email address:	
Date:	

Submits the application of the following umpires who are interested in being selected/appointed for the above mentioned tournament

IU #	Family NAME	First/Given Name	Asso-ciation	Age	Sex	Email address	BB	BBP	WB
5 digit	CAPITAL LETTERS	Proper Case	3 digit code		F / M	lower case	mark appropriate column		