



### COMPETITORS FINAL ENTRY FORM

	PARTNER 1	PARTNER 2
Name and surname		
IPC WDS ID Number		
IPC WDS License Number		
Address		
Phone/fax		
Nation		
Wheelchair partner	yes/no	yes/no
Standing partner	yes/no	yes/no
Man/lady	lady/man	lady/man
Date of birth		
Combi Standard	yes/no	yes/no
Combi Latin	yes/no	yes/no
Duo Standard	yes/no	yes/no
Duo Latin	yes/no	yes/no
Class	1 / 2	1 / 2

Please use **one** form for each couple.

**Note:** Athletes are eligible to participate in the Championships if the year of birth is 1993 or older according to the IDSF Rules.

Amateur declaration station:

'I am not a professional dancer, dance teacher nor adjudicator'

Athlete's signatures:

Date:

National Paralympic Committee:

President or General Secretary Printed name:

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ NPC Stamp: \_\_\_\_\_

**Please return before August 14<sup>th</sup>, 2009 to both addresses:**

Israel Paralympic Committee  
Radu Rosenthal  
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IPC Wheelchair Dance Sport  
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