

08: Staff Final Entry Form

**HANNOVER
2010
6./7. NOVEMBER**



IPC Wheelchair Dance Sport
World Championships



Deutscher Behindertensportverband e.V.
National Paralympic Committee Germany

Country / NPC: _____

Contact Person:

Name:	_____		
Address:	_____		
Tel:	_____	Fax:	_____
eMail:	_____		

Staff:

Surname, first name	m/f	Team leader, Medical, Coach, Physiotherapist, Technical, Staff
1		
2		
3		

Date: _____ Signature: _____ NPC Stamp: _____
President or General Secretary Printed Name: National Paralympic Committee

Please return before September 3rd, 2010, to both addresses

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