

**FIE FENCING ACADEMY**

**Budapest, April 3rd, 2017 – June 30th, 2017**

**APPLICATION FORM**

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| **FAMILY NAME** |  |
| **NAME** |  |
| **E-MAIL ADDRESS** |  |
| **PHONE NO.** |  |
| **FULL ADDRESS** |  |
| **DATE OF BIRTH** |  |
| **PLACE OF BIRTH** |  |
| **WEAPON** |  |
| **ALREADY ACTIVE AS A COACH?***If yes, please specify where (fencing club, national federation, school…) and exact position held* | **□ YES □ NO** |

Send the present application form, CV and copy of your passport to:

training.camp@fie.ch

**DEADLINE FOR SUBMISSION OF APPLICATIONS: March 15th, 2017**

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| Date | Signature |