

NCHA JUDGES SEMINAR
VEROLANUOVA – ITALY – 8/9 -10-2009
APPLICATION FORM / MODULO DI ISCRIZIONE
(da inviarsi via fax dal 1/09 entro il 20/09/2009)
to be faxed from September 1st 2009 within September 20th 2009
Fax number: +39 0372 837053

Nome/Name _____

*Giudice/Judge _____

*Auditore/Auditor _____

(specificare/specify)

Indirizzo/Address _____

Città/City _____

C.a.p/Zip code _____

Telefono/Phone: _____

Fax: _____

E-Mail : _____

Con la presente chiedo di essere iscritto all’NCHA EUROPEAN JUDGES SEMINAR
With the present form I ask to be entered to the NCHA EUROPEAN JUDGES SEMINAR

Firma / Signed by _____

Data /date: _____

Chiedo inoltre che mi vengano inviati il test scritto, l’NCHA judges application form al seguente indirizzo e-mail :

I also ask to send me the written test , the NCHA judges application form to the following e-mail address :
