



Umpire's Nomination Form

To be returned by September 1st 2017 to:

Belgian Paralympic Table Tennis Foundation
belgianttopen@gmail.com

Association submitting nomination: _____

Name of official submitting nomination: _____

Position in Association: _____

Telephone: _____ Fax: _____

E-mail: _____ Signature: _____

Nominated Umpire 1:

Mr Mrs Ms Other Please state: _____

First Name: _____ Family Name: _____

IU-Number: _____ IU: Blue Badge

IU: Blue Badge in progress IU: White Badge

Training in racket testing Yes No

Nominated Umpire 2:

Mr Mrs Ms Other Please state: _____

First Name: _____ Family Name: _____

IU-Number: _____ IU: Blue Badge

IU: Blue Badge in progress IU: White Badge

Training in racket testing Yes No

**Nominated Umpire 3:**Mr Mrs Ms Other Please state: _____

First Name: _____ Family Name: _____

IU-Number: _____ IU: Blue Badge IU: Blue Badge in progress IU: White Badge Training in racket testing Yes No **Nominated Umpire 4:**Mr Mrs Ms Other Please state: _____

First Name: _____ Family Name: _____

IU-Number: _____ IU: Blue Badge IU: Blue Badge in progress IU: White Badge Training in racket testing Yes No **Nominated Umpire 5:**Mr Mrs Ms Other Please state: _____

First Name: _____ Family Name: _____

IU-Number: _____ IU: Blue Badge IU: Blue Badge in progress IU: White Badge Training in racket testing Yes No **Nominated Umpire 6:**Mr Mrs Ms Other Please state: _____

First Name: _____ Family Name: _____

IU-Number: _____ IU: Blue Badge IU: Blue Badge in progress IU: White Badge Training in racket testing Yes No