

NOMINATION FORM

FINA WATER POLO REFEREES SCHOOL 2007

Place of the school:		
Date	es of the school:	
NATIONAL FEDERATION:		
1.	Family name:	
	First name:	
2.	Family name:	
	First name:	
3.	Family name:	
	First name:	
Signature of President or General Secretary of Federation:		
Date	e:	Name:
Offic	cial Stamp:	

PLEASE RETURN THIS COMPLETED FORM TO THE FINA OFFICE IN LAUSANNE (SUI) BY FAX (41-21) 312 6610 OR BY EMAIL: sportsdep@fina.org

Please copy this form depending on the number of judges you wish to nominate for the school. Please kindly note that incomplete forms will not be considered.