



Competition name

Application form

Pilot name: **Name1**

Gender: **Male**

Licence no.: **23523626**

FAI number: **13515**

CIVL ID: **0**

Date of birth: **25.10.1971**

Mobile phone: **808080**

Flying since: _____

Team: _____

Nation: **Austria**

Paraglider (EN 926/2): **Ozone ZENO**

Safety class: **EN-D**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name2**

Gender: **Male**

Licence no.: **23523627**

FAI number: **13516**

CIVL ID: **1**

Date of birth: **25.10.1972**

Mobile phone: **808081**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Ozone e3**

Safety class: **CCC**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name3**

Gender: **Male**

Licence no.: **23523628**

FAI number: **13517**

CIVL ID: **2**

Date of birth: **25.10.1973**

Mobile phone: **808082**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **BGD BGD Cure**

Safety class: **EN-C**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name4**

Gender: **Male**

Licence no.: **23523629**

FAI number: **13518**

CIVL ID: **3**

Date of birth: **25.10.1974**

Mobile phone: **808083**

Flying since: _____

Team: _____

Nation: **Austria**

Paraglider (EN 926/2): **Ozone enzo 3**

Safety class: **CCC**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name5**

Gender: **Male**

Licence no.: **23523630**

FAI number: **13519**

CIVL ID: **4**

Date of birth: **25.10.1975**

Mobile phone: **808084**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Niviuk Artik 5**

Safety class: **EN-C**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name6**

Gender: **Male**

Licence no.: **23523631**

FAI number: **13520**

CIVL ID: **5**

Date of birth: **25.10.1976**

Mobile phone: **808085**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Flow Paragliders Spectra**

Safety class: **CCC**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name7**

Gender: **Male**

Licence no.: **23523632**

FAI number: **13521**

CIVL ID: **6**

Date of birth: **25.10.1977**

Mobile phone: **808086**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Ozone enzo 3**

Safety class: **CCC**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name8**

Gender: **Male**

Licence no.: **23523633**

FAI number: **13522**

CIVL ID: **7**

Date of birth: **25.10.1978**

Mobile phone: **808087**

Flying since: _____

Team: _____

Nation: **Austria**

Paraglider (EN 926/2): **nan Ozone Zeno ML**

Safety class: **EN-D**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name9**

Gender: **Male**

Licence no.: **23523634**

FAI number: **13523**

CIVL ID: **8**

Date of birth: **25.10.1979**

Mobile phone: **808088**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Niviuk Niviuk Artik 5**

Safety class: **CCC**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name10**

Gender: **Male**

Licence no.: **23523635**

FAI number: **13524**

CIVL ID: **9**

Date of birth: **25.10.1980**

Mobile phone: **808089**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Ozone Delta 2**

Safety class: **EN-C**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name11**

Gender: **Male**

Licence no.: **23523636**

FAI number: **13525**

CIVL ID: **10**

Date of birth: **25.10.1981**

Mobile phone: **808090**

Flying since: _____

Team: _____

Nation: **Poland**

Paraglider (EN 926/2): **UP Paragliders Meru**

Safety class: **EN-D**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name12**

Gender: **Male**

Licence no.: **23523637**

FAI number: **13526**

CIVL ID: **11**

Date of birth: **25.10.1982**

Mobile phone: **808091**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Flow Paragliders XCRacer**

Safety class: **EN-D**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name13**

Gender: **Male**

Licence no.: **23523638**

FAI number: **13527**

CIVL ID: **12**

Date of birth: **25.10.1983**

Mobile phone: **808092**

Flying since: _____

Team: _____

Nation: **Austria**

Paraglider (EN 926/2): **Ozone Zeno ML**

Safety class: **EN-D**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name14**

Gender: **Male**

Licence no.: **23523639**

FAI number: **13528**

CIVL ID: **13**

Date of birth: **25.10.1984**

Mobile phone: **808093**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Flow Paragliders Spectra**

Safety class: **CCC**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name15**

Gender: **Male**

Licence no.: **23523640**

FAI number: **13529**

CIVL ID: **14**

Date of birth: **25.10.1985**

Mobile phone: **808094**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Ozone Enzo 3 M**

Safety class: **CCC**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name16**

Gender: **Male**

Licence no.: **23523641**

FAI number: **13530**

CIVL ID: **15**

Date of birth: **25.10.1986**

Mobile phone: **808095**

Flying since: _____

Team: _____

Nation: **Austria**

Paraglider (EN 926/2): **Ozone Ozone Zeno ML**

Safety class: **EN-D**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name17**

Gender: **Male**

Licence no.: **23523642**

FAI number: **13531**

CIVL ID: **16**

Date of birth: **25.10.1987**

Mobile phone: **808096**

Flying since: _____

Team: _____

Nation: **Austria**

Paraglider (EN 926/2): **Ozone ZENO**

Safety class: **EN-D**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name18**

Gender: **Male**

Licence no.: **23523643**

FAI number: **13532**

CIVL ID: **17**

Date of birth: **25.10.1988**

Mobile phone: **808097**

Flying since: _____

Team: _____

Nation: **Croatia**

Paraglider (EN 926/2): **Skywalk Cayenne 5**

Safety class: **EN-C**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name19**

Gender: **Male**

Licence no.: **23523644**

FAI number: **13533**

CIVL ID: **18**

Date of birth: **25.10.1989**

Mobile phone: **808098**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Gin Gliders GIN Explorer**

Safety class: **EN-B**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name20**

Gender: **Male**

Licence no.: **23523645**

FAI number: **13534**

CIVL ID: **19**

Date of birth: **25.10.1990**

Mobile phone: **808099**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Nova Nova Triton 2**

Safety class: **EN-C**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name21**

Gender: **Male**

Licence no.: **23523646**

FAI number: **13535**

CIVL ID: **20**

Date of birth: **25.10.1991**

Mobile phone: **808100**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Flow Paragliders Freedom**

Safety class: **EN-B**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name22**

Gender: **Male**

Licence no.: **23523647**

FAI number: **13536**

CIVL ID: **21**

Date of birth: **25.10.1992**

Mobile phone: **808101**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Flow Paragliders Spectra**

Safety class: **CCC**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name23**

Gender: **Male**

Licence no.: **23523648**

FAI number: **13537**

CIVL ID: **22**

Date of birth: **25.10.1993**

Mobile phone: **808102**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Ozone Delta 3**

Safety class: **EN-C**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name24**

Gender: **Male**

Licence no.: **23523649**

FAI number: **13538**

CIVL ID: **23**

Date of birth: **25.10.1994**

Mobile phone: **808103**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Triple seven Queen 2**

Safety class: **EN-C**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name25**

Gender: **Male**

Licence no.: **23523650**

FAI number: **13539**

CIVL ID: **24**

Date of birth: **25.10.1995**

Mobile phone: **808104**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **triple seven 777 Rook 2**

Safety class: **EN-B**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name26**

Gender: **Male**

Licence no.: **23523651**

FAI number: **13540**

CIVL ID: **25**

Date of birth: **25.10.1996**

Mobile phone: **808105**

Flying since: _____

Team: _____

Nation: **Czech Republic**

Paraglider (EN 926/2): **Gin Gliders Boomerang 11 M**

Safety class: **CCC**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name27**

Gender: **Male**

Licence no.: **23523652**

FAI number: **13541**

CIVL ID: **26**

Date of birth: **25.10.1997**

Mobile phone: **808106**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Niviuk Artik 5**

Safety class: **EN-C**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name28**

Gender: **Male**

Licence no.: **23523653**

FAI number: **13542**

CIVL ID: **27**

Date of birth: **25.10.1998**

Mobile phone: **808107**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Niviuk Artik 3**

Safety class: **EN-C**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name29**

Gender: **Male**

Licence no.: **23523654**

FAI number: **13543**

CIVL ID: **28**

Date of birth: **25.10.1999**

Mobile phone: **808108**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Gin Gliders Carrera**

Safety class: **EN-B**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name30**

Gender: **Male**

Licence no.: **23523655**

FAI number: **13544**

CIVL ID: **29**

Date of birth: **25.10.2000**

Mobile phone: **808109**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Ozone Delta 3**

Safety class: **EN-C**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name31**

Gender: **Male**

Licence no.: **23523656**

FAI number: **13545**

CIVL ID: **30**

Date of birth: **25.10.2001**

Mobile phone: **808110**

Flying since: _____

Team: _____

Nation: **Italy**

Paraglider (EN 926/2): **Nova Mentor 3 XS**

Safety class: **EN-B**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name32**

Gender: **Male**

Licence no.: **23523657**

FAI number: **13546**

CIVL ID: **31**

Date of birth: **25.10.2002**

Mobile phone: **808111**

Flying since: _____

Team: _____

Nation: **Austria**

Paraglider (EN 926/2): **Ozone Enzo3**

Safety class: **CCC**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name33**

Gender: **Male**

Licence no.: **23523658**

FAI number: **13547**

CIVL ID: **32**

Date of birth: **25.10.2003**

Mobile phone: **808112**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **777 Queen 2**

Safety class: **EN-C**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name34**

Gender: **Male**

Licence no.: **23523659**

FAI number: **13548**

CIVL ID: **33**

Date of birth: **25.10.2004**

Mobile phone: **808113**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Ozone enzo 3**

Safety class: **CCC**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name35**

Gender: **Male**

Licence no.: **23523660**

FAI number: **13549**

CIVL ID: **34**

Date of birth: **25.10.2005**

Mobile phone: **808114**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **777 Gambit**

Safety class: **CCC**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name36**

Gender: **Male**

Licence no.: **23523661**

FAI number: **13550**

CIVL ID: **35**

Date of birth: **25.10.2006**

Mobile phone: **808115**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Ozone Delta 3**

Safety class: **EN-C**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name37**

Gender: **Male**

Licence no.: **23523662**

FAI number: **13551**

CIVL ID: **36**

Date of birth: **25.10.2007**

Mobile phone: **808116**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **BGD BGD Cure**

Safety class: **EN-C**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name38**

Gender: **Male**

Licence no.: **23523663**

FAI number: **13552**

CIVL ID: **37**

Date of birth: **25.10.2008**

Mobile phone: **808117**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Ozone Enzo 3 M**

Safety class: **CCC**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name39**

Gender: **Male**

Licence no.: **23523664**

FAI number: **13553**

CIVL ID: **38**

Date of birth: **25.10.2009**

Mobile phone: **808118**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Ozone enzo 3**

Safety class: **CCC**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name40**

Gender: **Male**

Licence no.: **23523665**

FAI number: **13554**

CIVL ID: **39**

Date of birth: **25.10.2010**

Mobile phone: **808119**

Flying since: _____

Team: _____

Nation: **Slovenia**

Paraglider (EN 926/2): **Ozone enzo 3**

Safety class: **CCC**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name: **Name41**

Gender: **Male**

Licence no.: **23523666**

FAI number: **13555**

CIVL ID: **40**

Date of birth: **25.10.2011**

Mobile phone: **808120**

Flying since: _____

Team: _____

Nation: **Croatia**

Paraglider (EN 926/2): **Niviuk Peek 3**

Safety class: **EN-D**

Paraglider color: _____

Medical insurance, which includes paragliding competitions.

Company: _____

Card/policy number: _____

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Flying since:

Team:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

Medical insurance, which includes paragliding competitions.

Company:

Card/policy number:

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

Application form auto-generated at 04:57:29 PM on August 01, 2019.



Competition name

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Flying since:

Team:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

Medical insurance, which includes paragliding competitions.

Company:

Card/policy number:

Responsibility.

Participation in this competition is at the sole responsibility of each individual pilot. The event organizer does not claim any responsibility for the pilots or other third parties.

Meet director. Club, organizer

Signature by organizer.

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Competition name

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Flying since:

Team:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

Medical insurance, which includes paragliding competitions.

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Competition name

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Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Flying since:

Team:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

Medical insurance, which includes paragliding competitions.

Company:

Card/policy number:

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Competition name

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Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Flying since:

Team:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

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Card/policy number:

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Competition name

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Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Flying since:

Team:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

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Card/policy number:

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Competition name

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Pilot name:

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Licence no.:

FAI number:

CIVL ID:

Date of birth:

Flying since:

Team:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

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Nation:

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Safety class:

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Competition name

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FAI number:

CIVL ID:

Date of birth:

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Nation:

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Gender:

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FAI number:

CIVL ID:

Date of birth:

Flying since:

Team:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

Medical insurance, which includes paragliding competitions.

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Card/policy number:

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Competition name

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Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Flying since:

Team:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

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Card/policy number:

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Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Flying since:

Team:

Nation:

Paraglider (EN 926/2):

Safety class:

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Licence no.:

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CIVL ID:

Date of birth:

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Team:

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Paraglider (EN 926/2):

Safety class:

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Safety class:

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Paraglider (EN 926/2):

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Competition name

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Team:

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Paraglider (EN 926/2):

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Paraglider color:

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Licence no.:

FAI number:

CIVL ID:

Date of birth:

Flying since:

Team:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

Medical insurance, which includes paragliding competitions.

Company:

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