



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

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METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

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METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

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METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

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: _____

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

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. DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer.

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

Medical insurance, which includes paragliding competitions.

Company:

Card/policy number:

Responsibility.

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Meet director. DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer.

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METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

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. DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer.

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METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

Medical insurance, which includes paragliding competitions:

Company:

Card/policy number:

Responsibility:

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Meet director: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

Medical insurance, which includes paragliding competitions:

Company:

Card/policy number:

Responsibility:

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Meet director: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

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METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

Medical insurance, which includes paragliding competitions:

Company:

Card/policy number:

Responsibility:

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Meet director: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

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METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

Medical insurance, which includes paragliding competitions:

Company:

Card/policy number:

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METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

Medical insurance, which includes paragliding competitions:

Company:

Card/policy number:

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Meet director: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

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METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

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METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

Medical insurance, which includes paragliding competitions:

Company:

Card/policy number:

Responsibility:

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Meet director: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

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METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

Medical insurance, which includes paragliding competitions:

Company:

Card/policy number:

Responsibility:

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Meet director: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

Nation:

Paraglider (EN 926/2):

Safety class:

Paraglider color:

Medical insurance, which includes paragliding competitions:

Company:

Card/policy number:

Responsibility:

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Meet director: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

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. DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer.

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.



METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

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METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

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METULJMANIA OPEN 2019

Application form

Pilot name:

Gender:

Licence no.:

FAI number:

CIVL ID:

Date of birth:

Mobile phone:

Flying since:

Team:

Sponsors:

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: DJP Metulj Rimske Toplice, NAME LASTNAME

Signature by organizer:

Application form auto-generated at 09:32:30 AM on August 02, 2019.