



CHAMPIONSHIP ENTRY FORM FOR:

**21<sup>st</sup> FAI WORLD HANG GLIDING CLASS 1 CHAMPIONSHIP**

**14<sup>th</sup> FAI WOMEN'S WORLD HANG GLIDING CHAMPIONSHIP**

Brasília, Brazil

6<sup>th</sup> - 19<sup>th</sup> August 2017

All pilots must be validated by their NAC and registered in the on line FAI Sporting Licence Database prior to the start of the Championship.

NACs should nominate the pilots they wish to enter in the Championship on the form below by 05.05.2017, with the pilot's CIVL ID number. An authorised NAC representative must sign this form, with official stamp if applicable. Please see Local Regulations for further information. Please note that individual pilots will be required to complete an additional on line entry form providing all the personal details required.

Send complete form to: [brasilia2017@cbvl.esp.br](mailto:brasilia2017@cbvl.esp.br)

Name of National Aero Club \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Tel/email \_\_\_\_\_

We wish to enter the following competitors who qualify under the FAI Nationality or Residence Rules (General Section 3.1.3):

Family name/First name	Nationality/Res	Age	Gender	CIVL Pilot ID n° (WPRS)
1.				
2.				
3.				
4.				
5.				
Etc.				





The maximum number of pilots in the championship is 150.  
 The maximum number of pilots that may be entered by a NAC for each Championship is 12.  
 The maximum number of pilots constituting a national team for each Championship is 6.  
 NAC's are invited to submit applications for pilots in high enough numbers, so they can be included in case of extra allocation rounds.

Name and email of the Team Leader (If appointed) \_\_\_\_\_

Name/numbers of Assistants (If known) \_\_\_\_\_

<b>ENTRY FEES.</b>	For each pilot	500,00 Euro
	For each Team Leader/Assistant	250,00 Euro
	Total	_____

Deadline for payment of pilot fees is: See Local Regulations for payment details.

I/We declare that the above information is true, and that all the pilots meet the required qualifications for entry to this competition as per Section 7 and the Local Regulations.

Signed \_\_\_\_\_

Name \_\_\_\_\_ Position in NAC \_\_\_\_\_

Date \_\_\_\_\_

