ISU.ORG



Communication No. 2459 Appendix A

ISU MEMBER APPLICATION FORM VISITING ISU COACH DEVELOPMENT SUPPORT					
ISU MEMBER:			_		
NAME and CONTA	CT infor	mation of person completing applic	cation:		
Name:					
Address:					
E-mail:		7	Γelephone	Э :	
Application for:		Singles		Ice Dance	
		Pair Skating		Synchronized Skating	
		Short Track Speed Skating		Speed Skating	

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6. Provide a suggested initial schedul	le of the Visiting ISU Coach's assistance to you.
Place:	Date
Signature of ISU Member President	Signature of ISU Member General Secretary
organista or roomanista recordent	Gigitata of the member Contra Contra
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E-mail simultaneously to:	10110
ISU Development Commission	ISU Secretariat
dvcommission@isu.ch	development@isu.ch