

**APPLICATION CARD**

**V INTERNATIONAL CHAMPIONSHIP IN ALPINE SKIING AND SNOWBOARDING FOR THE  
CUP OF THE PRESIDENT OF THE IPA REGION ZAKOPANE**

**NAME AND SURNAME:** (FILL IN CAPITAL LETTERS)

.....

**DATE OF BIRTH** (only competitors): .....

**E-MAIL ADDRESS:**

.....

**PHONE NUMBER:** .....

**REGION IPA OR ORGANIZATION:**

.....

**TYPE OF PACKAGE:** (stay & starter, starter, stay)\* - tick the appropriate one

**COMPETITION:** (skiing, skiing master, snowboarding)\* - tick the appropriate one

I declare that there are no contraindications to take part in the competition and practice skiing/snowboarding, I accept the provisions of the competition regulations, I am aware of the need to purchase an accident insurance on my own for the day of the ski competition.

I undertake to pay for the selected package by bank transfer to the IPA Region Zakopane.

I accept the RODO clause.

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(City and date)

.....

(Signature)