

WORLD ARTISTIC ROLLER SKATING CHAMPIONSHIPS

Federation Name _____

President _____

CIPA Delegate _____

Note: A letter of authority as the country delegate to the CIPA Meeting **MUST** be submitted when nominating the CIPA delegate on this form.

Please complete the following contact details for your federation:

Federation Name	_____
Address	_____

Phone	_____
Fax	_____
Email	_____
Name of person completing this information	_____

Position in federation	_____
Signed	_____
Date	_____