

## Application form for the IPF Coach Licence, Level II

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| ***At***  ***Eleiko Facilities – Klastorpsvägen 18, 302 62 HALMSTAD- Sweden from 15th to 17th December 2023***  ***Arrival on the 14th and Departure on the 18th of December 2023***  ***Closing date for the application is 14th of November 2023*** |

**Course costs:**

***800,00 Euros* is the course fee, in this amount is included accommodation in a double room with breakfast and lunch during the course days!**

**Requirement for booking**

Family name:

Surname:

Nation:

Date of birth:

E-Mail:

Phone (with country code):

Mobile (with country code):

Full postal address with post (Zip) code:

Country:

**Attached please here your profile picture.**

**The profile picture should have a high quality!**

**You can use the size and quality of the attached profile picture as an example!**



**Name of National Federation or Ministry of Sport or Sport Council:**

**Valid passport number: Expire date:**

**Arrival date: Time: Airport/flight Number:**

**Departure date: Time: Airport/flight number:**

**For flying we recommend using the airport in Copenhagen – Denmark, or the airport in Gothenburg – Sweden! From both airports are train connections to Halmstad. Since the train tracks are directly under the airport, it will be easier to use the airport in Copenhagen!**

**Accommodation**

**Please note:** Accommodation costs are based on staying in a double room. If you require a single room, the accommodation costs will be higher (additional course costs)!

Additional costs for a single room included breakfast: **75 Euro**

I wish to stay in a Double room: Yes, **please state**

I wish to stay in a Single room: Yes, **please state**

**Food habits**

I eat all kind of food (Carnivores): Yes – **please state**

I prefer vegetarian food: Yes, **please state**

I prefer vegan food: Yes, **please state**

Food allergies (Gluten): Yes, **please state**

Food allergies (Lactose): Yes, **please state**

**Health questionnaire**

**Please answer the following questions:**

1. Have you been advised by your doctor against exercising? Yes – No **please state**

2. Are you recovering from an illness or operation? Yes – No **please state**

3. Are you on any medication? Yes – No **please state**

4. Do you suffer from high blood pressure/low blood pressure? Yes – No **please state**

5. Do you have a heart condition? Yes – No **please state**

6. Are you Diabetes? Yes – No **please state**

7. Do you suffer from Epilepsy? Yes – No **please state**

8. Are you Asthmatic? Yes – No **please state**

9. Do you currently have any muscular injuries? Yes – No **please state**

10. Is there any other information or problems that you feel may be relevant to you undertaking the course? Yes – No **please state**

**If “Yes” explain:**

**Every course participant who isn’t settled in a European country (EU or affiliated with the EU) is obliged to have health insurance during the course period and should examine whether an entry visa for Sweden is required!**

**Declaration**

I hereby confirm that I am in good physical conditions to undertake the course, and I will not hold IPF or its staff responsible for any personal injuries suffered through the undertaking of the course, whether occurring during participation or any activity or not.

Signed: Date:

**Please send the course application form to:**

Dietmar Wolf

E-Mail: [dietmar.wolf@powerlifting.sport](mailto:dietmar.wolf@powerlifting.sport)

Mobile: +47 958 53 606

With a copy to: Pjotr van den Hoek

E-Mail: [pjotr.van.den.hoek@powerlifting.sport](mailto:pjotr.van.den.hoek@powerlifting.sport)

**Course fee is payable to the following IPF accounts:**

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| **Name of the account:** | International Powerlifting Federation |
| **Name of the Bank:** | Caisse d'Epargne de l'Etat du Luxembourg |
| **Account number:** | IBAN: LU57 0019 1300 4802 3000 |
| **Bic (Swift) Code:** | BCEELULL |
| **Address**: | Place de Metz, 2954 Luxembourg |
|  | Luxembourg |

**Account Name:** International Powerlifting Federation

PayPal

**PayPal account:** [**gparage@vo.lu**](mailto:gparage@vo.lu)

[**dietmar.wolf@powerlifting.sport**](mailto:dietmar.wolf@powerlifting.sport)

**The payment must be done in the requested time - payment date is visible on the invoice!**

**Send a copy from the payment to IPF Treasurer Dietmar Wolf**

**E-Mail:** [dietmar.wolf@powerlifting.sport](mailto:dietmar.wolf@powerlifting.sport)

Please note that a participation will be not accepted without the prepayment!