

WHEELCHAIR FENCING COURSES BID APPLICATION FORM

IWAS Wheelchair Fencing



Date of Application: _____

It is understood that the bid document, appendices, and written communications relevant to the event below constitute an integral part of the agreement.

Section A: Who?

We, (Name of Organisation) _____, hereby apply for permission to stage an IWAS Wheelchair Fencing course for the year/s _____

Contact Person: _____ Position/Title: _____

Email: _____

Mobile/WhatsApp number: _____

What experience does your organisation have in organising wheelchair fencing events? _____

Section B: What?

IWAS Wheelchair Fencing International Referees Course

IWAS Wheelchair Fencing International Classifiers Course

IWAS Wheelchair Fencing Coaches Course

Section C: Where?

Proposed City, Country: _____

Name of International Airport/s: _____

Distance and travel time from airport/s to hotel/s _____

Name and website of hotel/s that will be used:

How many wheelchair accessible rooms does the hotel/s have in total _____



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Section D: When?

Course Dates:

Proposed Dates	Start date	Finish date	Alternative Dates
Arrival			
Course Dates			
Departure			

Is the course alongside / before an IWAS Wheelchair Fencing event tournament?

If "YES" please list what event this is: _____

Section E: Guarantees and Certifications

Will the International Course be open to all Wheelchair Fencing countries:

If "NO" please explain: _____

We, the Organising Committee, hereby undertake to:

1. Abide by the Rules and Regulations of the Events that they apply for.
2. The name of the course will start with the words "IWAS Wheelchair Fencing"
3. Include IWAS Wheelchair Fencing branding on all documentation. The logos will be provided to organising committees as soon as competition has been approved.
4. Provide appointed International Technical officials and Classifiers with the best possible facilities.
5. Provide progress reports at reasonable intervals.
6. Guarantee full financial responsibility for the costs of the organising the event and indemnify IWAS against any possible charges.
7. Supply IWAS with full results in the specified format.

Organising Committee's Bid Pack to include:

Letters of support from IWAS Full Member organisation in your country



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IWAS has the right to withdraw sanction if conditions are not fulfilled. Any dispute arising from this agreement will be dealt with under the law of England & Wales.

Signature On behalf of Bidding Organisation:

Name: _____ Position/Title: _____

_____ Date: _____

Signature

Please complete and return this form to the IWAS Sports Coordinator:
wheelchairfencing@iwasf.com and Cc harry.cootes@iwasf.com

For IWAS Office Use

Approval

IWAS WF Head of Referee / Head of Classifiers / Head of Coaches Commission:

Signature: _____

Date: _____

IWAS WF Executive Committee Member:

Signature: _____

Date _____

