



F I E
FEDERATION INTERNATIONALE D'ESCRIME

FORM FOR THE CANDIDATURE TO FIE REFEREEING EXAMINATIONS

Photo

Candidate to the refereeing examination
at :

Weapon : _____

Name and first name of the candidate : _____

Nationality : _____

Full date of birth (day/month/year) : _____

Tel. : _____ Fax : _____ E-mail : _____

Current categories and weapons : _____

Date of the payment to the FIE for the exam : _____

NB: requests for examinations will only be taken into account if the payment due to the FIE (50 CHF or 35 EUR) has been received together with this document.

Curriculum vitae :