

SV-LR**CEV SNOW VOLLEYBALL
LOCAL REFEREE REGISTRATION**

The National Federation of _____ nominates the listed referees (two per competition court) to officiate in the CEV Snow Volleyball European Tour event.

Venue: _____

Date: _____

Number of Competition Courts: _____

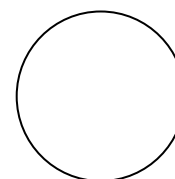
Nr.	Last Name, First Name	NF*	Age	FIVB ID	Status*	Activity*	#*	ENG
1								
2								
3								
4								
5								
6								
7								
8								
reserve								
Refereeing Manager (mandatory, supporting the CEV Referee Delegate on site)								
							N/A	

Explanations: NF: Referee's National Federation of origin (3 letter country code)
 Status: International (I), International Candidate (IC), National (N) Beach Volleyball referee
 Activity: Year of first activity as Snow Volleyball referee
 #: Number of matches officiated in Snow Volleyball competitions in the past 3 years
 ENG: Ability to communicate in English (Good/Fluent)

 Name (printed) and Signature of the President of
 the National Refereeing Commission

 Signature of the President and/or Secretary General

 Date and Venue



Seal of the National Federation

This form must be sent to snow@cev.eu duly completed