



III PAN AMERICAN CHAMPIONSHIP IPSC

Brasília, Brazil , 6-11 August 2006
www.cbtp.org.br/panam
panam@cbtp.org.br

Apply your
Passport size
Photo or send
it by e-mail

IMPORTANT

Competitor's Entry Form

Fill the form using Latin CAPITAL letters.

Region:

Full Name:

IPSC Alias: Date of Birth (dd/mm/yy): / /19 Gender: MALE FEMALE

Postal Address:

State – Country		Zip/Postal Code:	
Tel:		Fax:	
e-Mail: <input style="width: 600px; height: 20px;" type="text"/>			

Division: OPEN MODIFIED STANDARD PRODUCTION REVÓLVER

Category: LADY JUNIOR SENIOR SUPER SENIOR

I am an Brazilian Citizen and a GTE (Guia de Trafego Especial) for the handgun(s) that I will bring with me	
I am a Non-Brazilian Citizen and I will apply for a temporary Firearm Import Permit	

I will join the **OPENING Ceremony** NO YES

I will join the **CLOSING & AWARDS Banquet** NO YES , plus ___ extra person(s)

I will need **AMMUNITION** to participate NO YES ; if YES, caliber ___ qty:___

Special Squading Requirements

Only for **PRE-MATCH COMPETITORS**. Please ask your RD if you are eligible for a Pre-Match slot. If YES check all that apply:

Are You a Sponsor?	YES <input type="checkbox"/>	Are You a Match Official?	YES <input type="checkbox"/>
Are You a Regional Director?	YES <input type="checkbox"/>	Are You a Team Manager?	YES <input type="checkbox"/>

DATE AND SIGNATURE OF COMPETITOR

It can be replaced by a confirming e-mail by RD

DATE, FULL NAME AND SIGNATURE OF REGIONAL DIRECTOR

All Applications for an PANAM slot must be confirmed by Region's RD