**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Organization name)**

**To the President of International Grappling Federation**

**APPLICATION**

**Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

We, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ express our wish to become and apply to be accepted as International Grappling Federation (IGF) partner. We are familiar with the IGF activities, competition rules, belt exams’ program and other documents and do not object to them. We agree to participate in IGF sport events as well as to exchange and share information in order to promote the sport of grappling.

|  |  |
| --- | --- |
| Organization name |  |
| Organization code |  |
| Organization address |  |
| Organization phone number |  |
| Organization email |  |
| Organization website |  |
| Organization facebook |  |
| Organization instagram |  |
| Organization manager name |  |
| Organization manager. Date of birth |  |
| Organization manager address |  |
| Organization manager phone no. |  |
| Organization manager email |  |
| Organization manager facebook |  |

Please, attach:

* Organization registration document;
* Organization logo;
* Organization manager‘s passport copy;

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (organization manager/ name, surname) (Signature