



IBSA Blind Football referee form 2017-2021

Dear IBSA football referees,

This is a form that we would like you to complete in English and submit to IBSA Football Referees Coordinator 2017-2021, Mariano Travaglino, at football.referees@ibsasport.org.

1. Name, surname and date of birth	
2. Postal address, country, telephone, Skype account (optional) and email address	
3. Languages spoken and level (basic/intermediate/excellent)	
4. Are you a registered, qualified referee in your country? Since when, which level?	
5. Do you want to be an active referee in B1 games? (Yes or No)	
6. How many B1 games/which tournaments have you refereed at national or international level over the last two years?	
7. Do you want to be active in refereeing B2/B3 games? (Yes or No)	
8. How many B2/B3 and other futsal-football games/tournaments have you refereed at national or international level over the last two years?	
9. What is the name and email address of the Referee Coordinator in your national blind sports federation/NPC?	
10. Anything else that you would like to mention?	
Attach a photo of you (preferably wearing a referee kit in a blind football game)	(Photo)



Mariano Travaglino
IBSA Referee Coordinator

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