



## Application for Full Membership

Our Federation would like to become a Full Member of the International Committee of Sports for the Deaf.

**FULL NAME OF FEDERATION:**

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**OFFICIAL POSTAL ADDRESS:**

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*(Country)*

**FAX NUMBER:** + \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**NAME OF PRESIDENT**

**NAME OF SECRETARY-GENERAL**

Deaf? YES  NO

Deaf? YES  NO

We hereby apply for Full Membership of the International Committee of Sports for the Deaf and attach herewith:

- an English translation of our Constitution/Statutes and regulations
- Current financial reports
- Certificate of support by National Olympic Committee or Federal Government Department of Sport, etc.

We agree that if granted membership, our Federation will be bound by the International Committee of Sports for the Deaf Constitution.

\_\_\_\_\_  
(Signature)  
PRESIDENT

\_\_\_\_\_  
(Signature)  
SECRETARY-GENERAL

**(Appendix 1)**