IBSA Goalball Rankinç	Tournament Application Form
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Tourname	ent Name					
Sulaymaniy	ah International	Goa	llball Open Chan	npionship		
Location						
City	Sulaymaniyal	h		Countr		
Dates	From 23/04/2025			To 29/04/2025		
Gender			Yes	Women's No		
Proposed	Teams				10/	
	Men				Women's	
	TBO	C				
Officials						
		III re	eferees be use	ed for this t	ournament?	Yes / Nc
VVIITIDO/	Referee	Nar	ne		Nationality	IBSA Level
	TBC					
Possible	e modification	ns to	the IBSA Goa	alball Rules	s (any modification	must be
approve	d by the IBS/	A Go	alball Sub-Co	ommittee.)		

حيدر إسماعيل - قسم العلاقات

Contact Details									
Name Hayder Alru	Name Hayder Alrudaini Email iraq_pc2003@yahoo.com - alsalihi.saad@yahoo.com								
		allni.saau@yanoo.com							
1 110110 110	7901774325	Skype							
 the above to all teams wil the tournam by the IBSA all referees we have por competition unless this tournament the Technic Goalball So IBSA Goal conclusion 	n this form are tr burnament will ha I be (for the mos ent will be played Goalball Subcor officiating the tou osted, or permit on the IBSA web is a sanctioned will be open to a cal Delegate will ubcommittee: go ball website no of the tournamer	ave at last three tea t part) full internation d under full IBSA ru- mmittee; urnament will be cu- the IBSA Goalbal osite tournament with sp ill countries; send the results fro- oalball@ibsasport.co ot later than 15	ams in each category and that onal teams; ules unless approved in writing rrent IBSA Level I, II or III II Committee to advertise this becific qualification criteria, the om this tournament to the IBSA org and publish them on the calendar days following the						
Full Name	Saad Ahmed								
Signature	<u> </u>		29 / 01 20 25						
Date			<u>29 / 01 20 25</u>						

(Revised: 1 April 2019)

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