**HOJA DE INSCRIPCIÓN**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***D/Da.*** |  | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | |
| ***Fecha Nac.*** | |  | | ***DNI*** | |  | | ***Tlf:*** | |  | | | | ***e-mail*** | |  | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | |
| ***Domicilio:*** | |  | | | | | | | | | | | ***Nº/Piso:*** | |  | | | | ***C.P.:*** |  | |
|  | | | | | | | | | | | | | | | | | | | | | |
| ***Ciudad/Prov:*** | | |  | | | | | | | | ***C.N. nº*** | |  | | ***de fecha*** | |  | | | ***Dan*** |  |
|  | | | | | | | | | | | | | | | | | | | | | |
| ***Titulación:*** | |  | | | ***Nº*** |  | ***de fecha:*** | |  | | | ***club al que pertenece:*** | | | | | |  | | | |

**S O L I C I T A:**

Sea admitida la presente inscripción al **CURSO DE TITULACIÓN (FEDERATIVO)** que se celebrará en la Federación Valenciana de Judo y D.A., para la obtención del Título de:

|  |  |  |  |
| --- | --- | --- | --- |
| **MONITOR-INSTRUCTOR** |  |  |  |
|  | **Especificar deporte** | **Señalar con una x** | |
|  |  | |
| **PROFESOR-ENTRENADOR AUTONOMICO** |  |  |  |
|  | **Especificar deporte** | **Señalar con una x** | |

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| **MAESTRO-ENTRENADOR NACIONAL** |  |  |  |
|  | **Especificar deporte** | **Señalar con una x** | |

Y declaro cumplir todos los requisitos necesarios comprometiéndome, bajo mi responsabilidad, a **ASISTIR** y a **PRESENTAR** toda la documentación necesaria para la correcta tramitación del expediente antes del inicio del curso.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***En*** |  | ***, a*** |  | ***de*** |  | ***de 2019*** |

**El interesado/a,**

*Vº Bº*

*EL PRESIDENTE DE LA*

*FEDERACION\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.*