

**APPLICATION FOR MEMBERSHIP IN THE ESSF**

**TECHNICAL COMMISSIONS**

**for period 2025-2026**

**COUNTRY**

**ENTITY RESPONSIBLE FOR SCHOOL SPORT/ADDRESS/PHONE NUMBER**

**FULL NAME OF THE CANDIDATE (profession and function in National School Sport Entity)**

**TECHNICAL COMMISSION**

**DATE OF BIRTH**

**CONTACT DETAILS (ADDRESS, PHONE NUMBER, E-MAIL)**

NOTE:

* For each candidate a CV and motivation letter must be added to the duly complete application form.
* If authority responsible for school sport confirms the application, will send the member to the activities going with the function and will pay the costs.

**STAMP (SCHOOL SPORT AUTHORITY)** **SIGNATURE of the PRESIDENT**

 **SIGNATURE of the CANDIDATE**

Return before 15 May 2025 to

info@europeanschoolsport.com

 **DATE**