**INTEREST TO BID FORM**

**Please complete one form per Event.**

|  |  |
| --- | --- |
| National Federation: |  |
| Event Title |  |
| Event Location – City: |  |
| Event Location – Venue: |  |
| Country: |  |
| Year |  |
| Level of Event: |  |
| Discipline: |  |
| Age Level: |  |
| Contact Name: |  |
| Phone: |  |
| Mobile: |  |
| Fax: |  |
| E-mail address: |  |

***The Form is to be sent to the ICF Headquarters to*** [***events@canoeicf.sport***](mailto:events@canoeicf.sport)

***and the respective Technical Committee Chair b***

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