FISA

FISA ANTI-DOPING PROGRAMME

Main Training Location Form
(where athletes train every day)

To be Completed by the NATIONAL FEDERATION

Period Jan-Mar/ Apr-Jun / Jul-Sep / Oct-Dec 2019

Please send FISA a copy of this form for each main training location in your country where the international athletes from your national federation will be training in 2017. Please list the names of these international athletes training at these locations.
FISA should be notified of any changes in order to avoid missed tests.

FISA fax no.:+41 21 617 83 75 FISA email: natalie.schmutz@fisa.org

MAIN TRAINING LOCATION

1. ☐ **Men** ☐ **Women** ☐ **Lightweight Men**
☐ **Lightweight Women** ☐ **Junior Men** ☐ **Junior Women**

2. Name and position of person completing form:_____

3. Training Location address (INCLUDE INSTRUCTIONS ON HOW TO REACH THE VENUE)
STREET_____

TOWN/CITY & POST CODE_____

STATE / PROVINCE _____ COUNTRY _____

PHONE: (area code & number)_____ FAX NO:_____

4. Please provide Instructions on how to reach the training location on a separate document.

5. Athlete list
Please attach a name list of all athletes attending the above training location. Include dates of birth.

TRAINING SCHEDULE

6. Please indicate training times (from – to)

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Mornings							
Afternoons							

Form completed by:
Date: _____ National Federation: _____

Name (printed): _____Signed: _____