**OFFICIAL NOMINATION FORM**

|  |  |  |
| --- | --- | --- |
| Preliminary: January 4, 2018 | Final: February 12, 2018 | Last day for referees to change notification categories to be judged: 19 February, 2018  |

**The European Powerlifting Federation and the Czech Powerlifting Federation invite for the**

**1st Masters Women & Men European Equipped Powerlifting Championships 2018**

**in Helsingborg, Sweden, March 6 – 10, 2018**

**The final nomination form must be sent to:**

Original: **Meet Director:** Robert Ericsson - e-mail: robert.ericsson@styrkelyft.se

Copy: **Championships secretary:** Jiri Hofirek – e-mail: epfsecretary@gmail.com

 GSM: +420 739 405 689

**Correspondence: Meet Director**

Visa requests:<http://www.swedenabroad.com/sv-SE/>

Transport:see Informations on an electronic form**:** [**INFORMATIONS**](http://www.trippus.net/EM_Championship_startpage)

Accommodation: see Informations on an electronic form**:** [**INFORMATIONS**](http://www.trippus.net/EM_Championship_startpage)

**Registrations/payment: Grand Travel – Webregistration Support** europowerlifting@grandtravel.se

|  |  |  |
| --- | --- | --- |
| Submitted by |  | National Powerlifting Federation/Association Date: |

 Date:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Submitting officer: |  | Title: |  |  Preliminary omination: Date: |  |
|  |  |  |  |  Final omination:  |  |

**Submitting officer is responsible for the complete and accurate completion of all points of entry form!!!**

|  |  |  |  |
| --- | --- | --- | --- |
| Teammanager : |  | **Head Coach:** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Referee 1 : |  | Cat : |  | Available for categories: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Referee 2: |  | Cat: |  | Available for categories: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Referee 3 : |  | Cat : |  | Available for categories: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Referee 4: |  | Cat: | 1 | Available for categories: | Only for Jury in case of insufficient # of Cat. 1 referees  |

**All nominated referees attending a Championship, must be available for at least two days!!!**

(see IPF Technical Rules)

Each referee must state which categories he/she will be free from other duties (coach, lifter) in column “Available for categories”. He/she must referee in the stated categories if he/she is nominated by Technical committee for these classes. If available categories are not stated, he/she is obliged to referee in categories decided by the Technical official. **It is an obligation of every Federation to confirm the participation of all their Referees nominated in the Final nomination or cancel the referees who will not participate in the Championship!!!**

Latest date for changes of categories for which has been allocated by the Championship Secretary must be made latest 14 days prior to the Technical Meeting of the competition. If referees do not indicate changes to the Championships Secretary during that time, referees are obliged to be available for the original categories stated on EPF website on “Referees/Jury duty” section. **However, federations may allocate duties between their own referees latest at the technical meeting upon agreement by the appointed technical committee member.**

**Submitting officer address - a representative of the Federation is obliged to complete this address:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Officer’s name:** |  | **E-mail:** |  | **Phone:** |  |

|  |  |
| --- | --- |
| **Number of banquet tickets ordered** (**last day to cancel the ordered banquet tickets is 19 February, 2018:** |  |

**Important warning for referees & lifters !!!**

**At the EPF General Assembly 2015 a new rule was adopted in the EPF Constitution 13.10.1. The rule states: “Any lifter or referee properly entered for a competition that without acceptable reasons does not attend, may be subject to suspension up to 6 month for the first offence and up to 12 month for second offence and a max. fine of € 250.”**

##### NOMINATION FORM

**State each lifter’s personal best achieved at national or international championships during the previous 12 months. Enter the lifter’s family name and first name separately into an appropriate column below.**

***Please, use each lifter’s full first name, not his or her nickname!***

 **MEN**

 **Masters 1 MEN**

 **Class Family Name First Name Birthday SQ BP DL TOTAL**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Reserve lifters, max. 5 per team** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

 **Masters 2 MEN**

 **Class Family Name First Name Birthday SQ BP DL TOTAL**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Reserve lifters, max. 5 per team** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

 **Masters 3 MEN**

 **Class Family Name First Name Birthday SQ BP DL TOTAL**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Reserve lifters, max. 5 per team** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

 **Masters 4 Men**

 **Class Family Name First Name Birthday SQ BP DL TOTAL**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Reserve lifters, max. 5 per team** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

 **WOMEN**

**Masters 1 Women**

 **Class Family Name First Name Birthday SQ BP DL TOTAL**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Reserve lifters, max. 5 per team** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**Masters 2 Women**

 **Class Family Name First Name Birthday SQ BP DL TOTAL**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Reserve lifters, max. 5 per team** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**Masters 3 Women**

 **Class Family Name First Name Birthday SQ BP DL TOTAL**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Reserve lifters, max. 5 per team** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**Masters 4 Women**

 **Class Family Name First Name Birthday SQ BP DL TOTAL**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Reserve lifters, max. 5 per team** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

1. ACCREDITATION OF THE FEDERATION’S TEAM LEADERS

|  |
| --- |
| **Full and complete Name of team Leaders** |
|  |
|  |
|  |

**Please note**: Team leaders and Doctor or Physiotherapists **must** sit in the audience until they are

reason for them to go to the warm up/wrapping area. (i.e. if there is an injury). Also, Team Doctors

 or Physiotherapists must provide documentation to prove their qualification.

2. ACCREDITATION OF THE FEDERATION’S ASSISTANT COACHES

|  |  |
| --- | --- |
| **Full and Complete Name of each assistant Coach** | **Federation Title**  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

3. ACCREDITATION OF THE FEDERATION’S TEAM DOCTOR OR PHYSIOTHERAPIST

|  |
| --- |
| **Full and complete Name of team Doctor or physiotherapist –*** **must provide documentation to prove their qualification**
 |
|  |
|  |
|  |
|  |
|  |
|  |

**Please note**: Team doctor or physiotherapist **must** sit in the audience until they are required

 to go to the warm up/wrapping area i.e. if there is an injury.