European Powerlifting Federation



**OFFICIAL NOMINATION FORM**

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| Preliminary: 29th September, 2019 | Final: 7th November, 2019 | Last day for referees to changenotification categories to be judged:14th November, 2019 |

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

**European Classic Open, Junior and Sub-Junior Powerlifting Championships**

**in Kaunas, Lithuania, 24th November – 2nd December, 2019**

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

Original: **Meet Director:** Antanas Jodauga, E-mail: [antanas.jodauga@gmail.com](mailto:antanas.jodauga@gmail.com), phone: +370 312 64282

Copy: **Bjorn Astad**, e-mail: [bjorn@europowerlifting.org](mailto:bjorn@europowerlifting.org) phone: 47 91817979, Norway

**Correspondence:**

Visa requests:Vesta Stankevičienė – e-mail: [viza@trikove.lt](mailto:viza@trikove.lt)

Transport, accommodation: Vesta Stankevičienė – e-mail: [hotel@trikove.lt](mailto:hotel@trikove.lt)

Phone.: +370 621 49407

**Technical secretary:** Silva Katutyte, e-mail: [silva.katutyte@gmail.com](mailto:silva.katutyte@gmail.com) phone:+370 615 82192

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| Submitted by |  | National Powerlifting Federation/Association Datum |

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| Submitting officer: |  | | | Title: |  | | Preliminary nomin. |  |
|  | | Date: |  | | | Final nomination | |  |  |

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

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| Team manager : |  | **Head Coach:** |  |

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| Referee 1 : |  | Cat : |  | \*Available for categories/ **days**: |  |

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| Referee 2: |  | Cat: |  | \*Available for categories/ **days**: |  |

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| Referee 3 : |  | Cat : |  | \*Available for categories/ **days**: |  |

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| Referee 4: |  | Cat: | 1 | \*Available for categories/ **days**: | Only for Jury in case of insufficient # of Cat. 1 referees |

**It is obligatory to fill in the category or the day in which the referee is available for duty! This information is binding for the referee.**

**All nominated referees attending a Championship, must be available for at least two days!!!** (see IPF Technical Rules)

**Confirmation of the referee’s participation.**

It is the responsibility of each Federation to validly confirm in the final nomination in which categories their referees will be available, or cancel the referees who will not participate in the Championships.

**Important**:

All referees nominated at the time of the final nomination will be awarded referee duties by the EPF Technical Secretary (TS) and the referee list will be published at the EPF web. All federations/referees must control this list and if they do not agree, they must immediately contact the TS for corrections.  
All corrections must be made latest 14 days prior to the date of the technical meeting.

**14 November - 14 days prior to the technical meeting** (if not otherwise specified by the TS) is the mandatory referee list published.

**Any changes requested by the referees after this date will cause a fine of 100 Euro.**However, federations may allocate duties between their own referees latest at the technical meeting without any fine.

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| **Number of Open banquet tickets 35 euros** (**last day to cancel the banquet tickets is Nov. 14, 2019)** |  |

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| **Number of Junior banquet tickets 25 euros** (**last day to cancel the banquet tickets is Nov. 14, 2019)** |  |

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

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

##### NOMINATION FORM

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

**MEN**

**Open**

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

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

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

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

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**WOMEN**

**Open**

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**Juniors**

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

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

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

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| **Reserve lifters, max. 5 per team** | |  |  |  |  |  |  |
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1. ACCREDITATION OF THE FEDERATION’S TEAM LEADERS

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

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| **Full and Complete Name of each assistant Coach** | **Federation Title** |
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3. ACCREDITATION OF THE FEDERATION’S TEAM DOCTOR OR PHYSIOTHERAPIST

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

Visa Support Form

# LITHUANIAN POWERLIFTING FEDERATION

Vesta Stankevičienė

**tel.: +370 621 49407 e-mail:** [**viza@trikove.lt**](mailto:viza@trikove.lt)

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| Full names of athletes | Birth Day | Passport Number | Expiration Date |
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