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| Preliminary: July 27, 2019 | Final: September 4, 2022 | Latest day for changes of categories for which referee has been allocated: September 11, 2022 |

**The European Powerlifting Federation and the Slovak Fitness, Bodybuilding and Powerlifting Association invite for the 24th Danube Cup 2022 in Žilina, Slovakia**

**from 24 – 25 September 2022**

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

Original: **Meet Director:** Dominik Olexa tel.: +421 915 386 602 e-mail: [dominik.olexa@gmail.com](mailto:dominik.olexa@gmail.com)

**Accommodation & transport:** Veronika Olexová tel.: + 421 915 386 602 e-mail: [olexa.veronika@gmail.com](mailto:olexa.veronika@gmail.com)

Copy 1: **Danube Cup Director: Pavol Muller,** A. Hlinku 39/19, 92101 Piestany, Slovakia

e-mail: [mullerp.bp@gmail.com](mailto:mullerp.bp@gmail.com) Phone:+421 903322326

Copy 2: **Bjorn Astad**, e-mail: [bjorn@europowerlifting.org](mailto:bjorn@europowerlifting.org) phone: 47 91817979, Norway

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| Submitted by |  | National Powerlifting Federation/Association Dat. |

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

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

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

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

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

**IMPORTANT**:  It is obligatory to fill in the category 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 hole competition day!**

(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 - very important, responsible for the complete!**

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

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| **Number of banquet tickets ordered** (**last day to cancel the ordered banquet tickets is September , 2022:** |  |

##### NOMINATION FORM EQUIPPED

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

**MEN - *max. 4 Men at –59.0 to 120.0+ categories, max 2 lifters per class***

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| **Class** | **Last name** | **First name** | **Date of birth** | **SQ** | **BP** | **DL** | **TOTAL** |
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**MEN (organizer B team) – *max. 4 Men at –59.0 to 120.0+ categories, max 2 lifters per class***

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| **Class** | **Last name** | **First name** | **Date of birth** | **SQ** | **BP** | **DL** | **TOTAL** |
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**Reserve lifters, max. 5 per team**

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##### NOMINATION FORM EQUIPPED

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

**WOMEN – *max. 4 Women at –47.0 to 84.0+ categories, max 2 lifters per class***

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| **Class** | **Last name** | **First name** | **Date of birth** | **SQ** | **BP** | **DL** | **TOTAL** |
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**WOMEN (organizer B team) – *max. 4 Women at –47.0 to 84.0+ categories, max 2 lifters per class***

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| **Class** | **Last name** | **First name** | **Date of birth** | **SQ** | **BP** | **DL** | **TOTAL** |
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**Reserve lifters, max. 5 per team**

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##### NOMINATION FORM CLASSIC

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

**MEN - *max. 4 Men at –59.0 to 120.0+ categories, max 2 lifters per class***

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| **Class** | **Last name** | **First name** | **Date of birth** | **SQ** | **BP** | **DL** | **TOTAL** |
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**MEN (organizer B team) – *max. 4 Men at –59.0 to 120.0+ categories, max 2 lifters per class***

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| **Class** | **Last name** | **First name** | **Date of birth** | **SQ** | **BP** | **DL** | **TOTAL** |
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**Reserve lifters, max. 5 per team**

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##### NOMINATION FORM CLASSIC

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

**WOMEN – *max. 4 Women at –47.0 to 84.0+ categories, max 2 lifters per class***

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| **Class** | **Last name** | **First name** | **Date of birth** | **SQ** | **BP** | **DL** | **TOTAL** |
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**WOMEN (organizer B team) – *max. 4 Women at –47.0 to 84.0+ categories, max 2 lifters per class***

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| **Class** | **Last name** | **First name** | **Date of birth** | **SQ** | **BP** | **DL** | **TOTAL** |
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**Reserve lifters, max. 5 per team**

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**ACCREDITATION OF THE FEDERATION’S TEAM LEADERS**

Full and complete Name of team Leaders

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**Please note**: Team leaders **must** sit in the audience until they are reason for them to go to the warm up/  
wrapping area.

**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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**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

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**SLOVENSKÁ ASOCIÁCIA FITNES, KULTURISTIKY A SILOVÉHO TROJBOJA**

**Official name:**

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