***Form 1: COMPETITORS NUMERICAL REGISTRATION FORM***

**FEDERATION**

|  |  |  |  |
| --- | --- | --- | --- |
| **Kata** | **Pair 1** | **Pair 2** | **h** |
| **Nage No Kata**  **Tori age 18- 35**  **Tori age 36 and over** | **Yes no**    **Yes no** | **Yes no**    **Yes no** |  |
| **Ju-no-kata**  **Tori age 18- 45**  **Tori age 46 and over** | **Yes no**    **Yes no** | **Yes no**    **Yes no** |  |
| **Goshin-jutsu**  **Tori age 18- 47**  **Tori age 48 and over** | **Yes no**    **Yes no** | **Yes no**    **Yes no** |  |
| **Katame-no-kata**  **Tori age 18- 45**  **Tori age 46 and over** | **Yes no**    **Yes no** | **Yes no**    **Yes no** |  |
| **Kime-no-kata**  **Tori age 18- 47**  **Tori age 48 and over** | **Yes no**    **Yes no** | **Yes no**    **Yes no** |  |

|  |  |
| --- | --- |
| **Coaches** |  |
| **Judges** |  |
| **Team Officials** |  |

This document has to be completed and sent to the EJU General Secretariat & the Czech Judo Federation **before the 9th of September 2011.**

**DATE:**

***Signature of the head of the delegation and stamp of the federation***

***Form 1: COMPETITORS NUMERICAL REGISTRATION FORM***

**FEDERATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Team 1** | **Team 2** | **Team 3** |  |
| **Judo-Show** | **Yes No** | **Yes No** | **Yes No** |  |

|  |  |
| --- | --- |
| **Coaches** |  |
| **Medics** |  |
| **Physiotherapist** |  |
| **Referees** |  |
| **Team Officials** |  |

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**DATE:**

***Signature of the head of the delegation and stamp of the federation***

***Form 1: DEMONSTRATION NUMERICAL REGISTRATION FORM***

**FEDERATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Kata** | **Pair 1** | **Pair 2** | **Pair 3** |  |
| **Koshiki no Kata** | **Yes no** | **Yes no** | **Yes no** |  |
| **Itsursu no Kata** | **Yes no** | **Yes no** | **Yes no** |  |

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**DATE:**

***Signature of the head of the delegation and stamp of the federation***

***Form 2:* *COMPETITORS NOMINAL REGISTRATION FORM***

**FEDERATION ………………………………………………………………………………………**

**Nage No Kata:**  **TORI UKE**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** |
| **Group 1: Tori from the age 18 (1993) until the age of 35 (1976)** | | | | | | | | |
| ***1*** |  |  |  |  |  |  |  |  |
| ***2*** |  |  |  |  |  |  |  |  |
| **Group 2: Tori from the age 36 (1996) and over** | | | | | | | | |
| ***1*** |  |  |  |  |  |  |  |  |
| ***2*** |  |  |  |  |  |  |  |  |

**Katame No Kata:**  **TORI UKE**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** |
| **Group 1: Tori from the age of 18 (1993) until the age of 45 (1966)** | | | | | | | | |
| ***1*** |  |  |  |  |  |  |  |  |
| ***2*** |  |  |  |  |  |  |  |  |
| **Group 2: Tori from the age of 46 (1965) and over** | | | | | | | | |
| ***1*** |  |  |  |  |  |  |  |  |
| ***2*** |  |  |  |  |  |  |  |  |

**Ju No Kata:**  **TORI UKE**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** |
| **Group 1: Tori from the age of 18 (1993) until the age of 45 (1966)** | | | | | | | | |
| ***1*** |  |  |  |  |  |  |  |  |
| ***2*** |  |  |  |  |  |  |  |  |
| **Group 2: Tori from the age of 46 (1965) and over** | | | | | | | | |
| ***1*** |  |  |  |  |  |  |  |  |
| ***2*** |  |  |  |  |  |  |  |  |

**Kime No Kata:**  **TORI UKE**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** |
| **Group 1: Tori from the age of 18 (1993) until the age of 47 (1964)** | | | | | | | | |
| ***1*** |  |  |  |  |  |  |  |  |
| ***2*** |  |  |  |  |  |  |  |  |
| **Group 2: Tori from the age of 48 (1963) and over** | | | | | | | | |
| ***1*** |  |  |  |  |  |  |  |  |
| ***2*** |  |  |  |  |  |  |  |  |

**Kodokan Goshin Jitsu:**  **TORI UKE**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** |
| **Group 1: Tori from the age of 18 (1993) until the age of 47 (1964)** | | | | | | | | |
| ***1*** |  |  |  |  |  |  |  |  |
| ***2*** |  |  |  |  |  |  |  |  |
| **Group 2: Tori from the age of 48 (1963) and over** | | | | | | | | |
| ***1*** |  |  |  |  |  |  |  |  |
| ***2*** |  |  |  |  |  |  |  |  |

**Please send this form no later than the 10th of October 2011 to the Czech Judo Federation**

**NOTE: This form is only for organiser’s purposes. Unless the inscription is done in Jumas by the deadline, the inscription is not valid.**

**DATE:………………………**

***Signature of the head of the delegation and stamp of the federation***

***Form 2: KATA DEMONSTRATION - NOMINAL REGISTRATION FORM***

**FEDERATION ………………………………………………………………………………………**

**Koshiki No Kata:**  **TORI UKE**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** |
| ***1*** |  |  |  |  |  |  |  |  |
| ***2*** |  |  |  |  |  |  |  |  |
| ***3*** |  |  |  |  |  |  |  |  |

**Isutsu No Kata:**  **TORI UKE**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** |
| ***1*** |  |  |  |  |  |  |  |  |
| ***2*** |  |  |  |  |  |  |  |  |
| ***3*** |  |  |  |  |  |  |  |  |

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**DATE:………………………..**

***Signature of the head of the delegation and stamp of the federation***

***Form 2:*** ***JUDO SHOW EUROPEAN CUP - COMPETITORS NOMINAL REGISTRATION FORM***

**FEDERATION**

**Judo Show Team 1**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**Judo Show Team 2**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**Judo Show Team 3**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** | ***First Name*** | ***Family Name*** | ***Birthday*** | ***DAN*** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**Please send this form before the 10th of October 2011 to the Czech Judo Federation**

**NOTE: This form is only for organiser’s purposes. Unless the inscription is done in Jumas by the deadline, the inscription is not valid.**

**DATE:……………………………..**

***Signature of the head of the delegation and stamp of the federation***

***Form 3: Judges Registration Form***

**FEDERATION ……………………………………………………………………**

The following judges will represent our federation at the above mentioned championships.

**NAME:** **First name:**  **Sex:**  ……….

**Licence:**

Nage-No-Kata Katame-No-Kata Kime-No-Kata Kodokan-Goshin-Jitsu Ju-No-Kata

**Judging also Judo Show:** YES / NO

**Email Address:**

**NAME:** **First name:**  **Sex:**  ……….

**Licence:**

Nage-No-Kata Katame-No-Kata Kime-No-Kata Kodokan-Goshin-Jitsu Ju-No-Kata

**Judging also Judo Show:** YES / NO

**Email Address:**

**NAME:** **First name:**  **Sex:**  ……….

**Licence:**

Nage-No-Kata Katame-No-Kata Kime-No-Kata Kodokan-Goshin-Jitsu Ju-No-Kata

**Judging also Judo Show:** YES / NO

**Email Address:**

**NAME:** **First name:**  **Sex:**  ……….

**Licence:**

Nage-No-Kata Katame-No-Kata Kime-No-Kata Kodokan-Goshin-Jitsu Ju-No-Kata

**Judging also Judo Show:** YES / NO

**Email Address:**

The travel and stay costs are to be paid by your federation.

This document has to be completed and sent to the EJU General Secretariat and the Czech Judo Federation. No later than **the 10th of October 2011.**

**DATE:** ……………………….

***Signature of the President and stamp of the federation***

***Form 4 : Visa Application Form***

**FEDERATION Stamp & Signature**

Our delegation needs the invitation from \_\_\_\_\_\_ till the \_\_\_\_\_\_ of October 2011.

We will apply for visas at the CzechEmbassy in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(country, city)

*Please fill in the table in BLOCK LETTERS.*

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Date of expiry*** |  |  |  |  |  |  |  |  |  |  |  |  |
| ***Date of issue*** |  |  |  |  |  |  |  |  |  |  |  |  |
| ***Pass No*** |  |  |  |  |  |  |  |  |  |  |  |  |
| ***Nationality*** |  |  |  |  |  |  |  |  |  |  |  |  |
| ***Place of Birth*** |  |  |  |  |  |  |  |  |  |  |  |  |
| ***Date of Birth*** |  |  |  |  |  |  |  |  |  |  |  |  |
| ***Position*** |  |  |  |  |  |  |  |  |  |  |  |  |
| ***First Name*** |  |  |  |  |  |  |  |  |  |  |  |  |
| ***Surname*** |  |  |  |  |  |  |  |  |  |  |  |  |

***Form 5 : Media Accreditation Form***

**FEDERATION**

|  |  |  |
| --- | --- | --- |
| **Surname** |  |  |
| **Name** |  |  |
| **Passport Number** |  |  |
| **AIPS Card No** |  |  |
| **Company** |  |  |
| **Address** |  |  |
| **Email** |  |  |
| **Phone** |  |  |
| **Mobile** |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Function (please circle)** | Journalist | Photographer | Technician |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **If Journalist (please circle)** | Television | Radio | Newspaper | Magazine | Internet |  |

|  |  |  |
| --- | --- | --- |
| **Hotel Reservation** | Please use hotel reservation form |  |
| **Travel Schedule** | Please use travel schedule form |  |
| **Meals** | Please use lunch and dinner reservation form |  |

This document also has to be completed and sent to the **EJU General Secretariat and the organizers not later than the 30th of September 2011.**

This form has to be signed and confirmed by the Federation of the country which the journalists are representing.

DATE …………………………………….

***Signature of the head of the delegation and stamp of the Federation***

***Form 6 : Hotel Reservation Form***

***Please send this form to the:***

***organizing Committee via fax + 420 257 214 265 or Email: czechjudo@czechjudo.cz***

**FEDERATION ………………………………………..**

**Accommodation (Bed & Breakfast)**

**Room 3 nights package 1 night**

**- Single room €. 285,- €. 110,-**

**- Double room €. 225,- €. 85,-**

**- Triple room €. 225,- €. 85,-**

|  |  |
| --- | --- |
| **MEALS** / optional | |
| Buffet dinner in hotel DUO | 12 € |
| Lunch box in competition hall | 8 € |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Hotel Duo** | **Room type**  Single, double | **Arrival Date** | **Departure date** | **Number of persons** | **Number of nights** | **Number of Buffet Dinners** | **Number of Lunch Boxes** | **Total amount**  **€** |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |

**Total:**

**DATE** **SIGNATURE**

**Please make all payments via bank transfer no later than the 22nd of September 2011**

**All payments after deadline (the deadline is 22nd of September 2011) or cash payments in accreditation, 10% charge will be added.**

Name of Bank : Raiffeisen Bank

Branch: Lidická 42, 150 00 Praha 5, Czech Republic

Account Nr.: 5080998001/5500

Swift code: RZBCCZPP

IBAN code: CZ6255000000005080998001

**Please send this form no later than the 22nd of September 2011 to the Organizing Committee with attached documents of payments (bank accreditation transfer operation)**

***Form 7 : Travel Schedule***

**FEDERATION:**

**ARRIVAL IN CZECH REPUBLIC AIRPORT Prague**

**PLANE:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date** | **Time**  **Arrival** | **Flight number** | **From** | **Number of persons** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**TRAIN:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Time**  **Arrival** | **Train from** | **Number of persons** |
|  |  |  |  |
|  |  |  |  |

**CAR/BUS:**

|  |  |  |
| --- | --- | --- |
| **Date** | **Time** | **Number of persons** |
|  |  |  |

**DEPARTURE FROM CZECH REPUBLIC AIRPORT PRAGUE**

**PLANE:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date** | **Time departure** | **Flight number** | **To** | **Number of**  **persons** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**TRAIN:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Time departure** | **Train** | **Number of**  **persons** |
|  |  |  |  |
|  |  |  |  |

**CAR/BUS:**

|  |  |  |
| --- | --- | --- |
| **Date** | **Time** | **Number of persons** |
|  |  |  |

**Please send this form no later than the 30th of September 2011**

**to the organizing Committee**