

ENTRY FORM

**18TH EUROPEAN
VETERANS ATHLETICS CHAMPIONSHIPS-STADIA**
ZITTAU • BOGATYNIA / ZGORZELEC • HRÁDEK N.N.
AUGUST 16–25, 2012



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FAMILY NAME		
FIRST NAME		
STREET NR		
POSTCODE		
CITY		
COUNTRY		
PHONE		
E-MAIL		

NATIONALITY			
CLUB			
GENDER	<input type="checkbox"/> MALE	<input type="checkbox"/> FEMALE	
DATE OF BIRTH			DD MM YYYY
AGE GROUP	Age on 16th August 2012		
ID CARD NO.			
DLV PASS NO. *			

Please use capital letters to complete this form.

*only for German applicants

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X	EVENT	MEN'S AGE GROUP	WOMEN'S AGE GROUP	BEST PERFORMANCE 2011/12	
<input type="checkbox"/>	100 M	35 – 90+	35 – 90+		SEC
<input type="checkbox"/>	200 M	35 – 90+	35 – 90+		SEC
<input type="checkbox"/>	400 M	35 – 90+	35 – 90+		SEC
<input type="checkbox"/>	800 M	35 – 90+	35 – 90+		SEC
<input type="checkbox"/>	1.500 M	35 – 90+	35 – 90+		SEC
<input type="checkbox"/>	5.000 M	35 – 85	35 – 90+		SEC
<input type="checkbox"/>	10.000 M	35 – 85	35 – 90+		SEC
<input type="checkbox"/>	80 M HURDLES	70 – 85	40 – 85		SEC
<input type="checkbox"/>	100 M HURDLES	50 – 65	35		SEC
<input type="checkbox"/>	110 M HURDLES	35 – 45	/		SEC
<input type="checkbox"/>	200 M HURDLES	80 – 85	70 – 75		SEC
<input type="checkbox"/>	300 M HURDLES	60 – 75	50 – 65		SEC
<input type="checkbox"/>	400 M HURDLES	35 – 55	35 – 45		SEC
<input type="checkbox"/>	2.000 M STEEPLECHASE	60 – 80	35 – 75		SEC
<input type="checkbox"/>	3.000 M STEEPLECHASE	35 – 55	/		SEC
<input type="checkbox"/>	5.000 M TRACK WALK	35 – 90+	35 – 85		SEC
<input type="checkbox"/>	10 KM ROAD WALK	/	35 – 85		MIN
<input type="checkbox"/>	20 KM ROAD WALK	35 – 85	/		MIN
<input type="checkbox"/>	MARATHON	35 – 85	35 – 80		MIN
<input type="checkbox"/>	HIGH JUMP	35 – 90+	35 – 90+		CM
<input type="checkbox"/>	POLE VAULT	35 – 85	35 – 80		CM
<input type="checkbox"/>	LONG JUMP	35 – 90+	35 – 90+		CM
<input type="checkbox"/>	TRIPLE JUMP	35 – 85	35 – 85		CM
<input type="checkbox"/>	SHOT PUT	35 – 90+	35 – 90+		CM
<input type="checkbox"/>	DISCUS THROW	35 – 90+	35 – 90+		CM
<input type="checkbox"/>	HAMMER THROW	35 – 90+	35 – 90+		CM
<input type="checkbox"/>	JAVELIN THROW	35 – 90+	35 – 90+		CM
<input type="checkbox"/>	WEIGHT THROW	35 – 90+	35 – 90+		CM
<input type="checkbox"/>	HEPTATHLON	/	35 – 85		PTS
<input type="checkbox"/>	DECATHLON	35 – 90+	/		PTS
<input type="checkbox"/>	THROWING PENTATHLON	35 – 90+	35 – 90+		PTS

Mark (X) the applicable boxes

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X	YEAR	VENUE
<input type="checkbox"/>	1978	VIAREGGIO ITALY
<input type="checkbox"/>	1980	HELSINKI FINLAND
<input type="checkbox"/>	1982	STRASBOURG FRANCE
<input type="checkbox"/>	1984	BRIGHTON GR. BRITAIN
<input type="checkbox"/>	1986	MALMÖ SWEDEN
<input type="checkbox"/>	1988	VERONA ITALY
<input type="checkbox"/>	1990	BUDAPEST HUNGARY
<input type="checkbox"/>	1992	KRISTIANSAND NORWAY
<input type="checkbox"/>	1994	ATHENS GREECE

X	YEAR	VENUE
<input type="checkbox"/>	1996	MALMÖ SWEDEN
<input type="checkbox"/>	1998	CESENATICO ITALY
<input type="checkbox"/>	2000	JYVÄSKYLÄ FINLAND
<input type="checkbox"/>	2002	POTSDAM GERMANY
<input type="checkbox"/>	2004	AARHUS DENMARK
<input type="checkbox"/>	2006	POZNAN POLAND
<input type="checkbox"/>	2008	LJUBLJANA SLOVENIA
<input type="checkbox"/>	2010	NYÍREGYHÁZA HUNGARY

Please indicate which of the Championships you have attended as a competitor.

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ACCOMPANYING PERSON

FAMILY NAME		
FIRST NAME		
STREET NR		
POSTCODE		
CITY		
COUNTRY		
PHONE		
E-MAIL		

NATIONALITY			
GENDER	<input type="checkbox"/> MALE	<input type="checkbox"/> FEMALE	
DATE OF BIRTH			DD MM YYYY
ID CARD NO.			

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ENTRY FEES	EUR	NUMBER	TOTAL
FIRST EVENT <i>track and field except for combined events</i>	40		
COMBINED EVENTS <i>heptathlon, decathlon, weight pentathlon</i>	50		
EACH ADDITIONAL EVENT <i>track and field</i>	15		
COUNTRY-FEE* <i>(For German athletes the fee is EUR 10)</i>	*		
ACCOMPANYING PERSONS <i>adult</i>	25		
ACCOMPANYING PERSONS <i>child (age 6 - 14)</i>	10		
THE RESULT BOOKLET <i>printed</i>	20		
THE RESULT BOOKLET <i>on CD</i>	5		
ATHLETES' PARTY	40		
PROCESSING FEE <i>per non-electronic registration</i>	10		10
TOTAL EUR			

The total sum must be paid in Euros and is to be deposited only into the account of the LOC no later than May 31 2012. When transferring payment, please indicate "EVACS 2012" on the purpose line of the form.

*In a few countries you have to pay an additional fee - please ask your national veterans athletics association.

Account number: 3100 0034 37
 Bank: Sparkasse Oberlausitz/Niederschlesien
 BLZ: 850 501 00
 IBAN: DE15 8505 0100 3100 0034 37
 SWIFT (BIC): WELADED1GRL

DECLARATION OF CONSENT/ DOPING CONTROL

By signing this Entry form, I declare that I am familiar with the current requirements and procedures regarding therapeutic use exemptions (TUE) and doping controls and with the present Anti-Doping-Rules and Regulations determined by IAAF as well as the Anti-Doping-Codes issued by WADA and NADA and that I acknowledge them to their full extent. I further declare and affirm herewith to abstain from any illegal performance enhancement, specifically by way of doping and to support anything that prevents the use of unintended or extraneous doping medication. Prohibited substances and methods are listed in the 2011 Prohibited List issued by WADA and, as from 01.01.2012, in the 2012 List. I know that as a participant in this competition I am subject to doping control and that I am obliged to submit myself to doping control if asked to do so. I know that refusal to submit to doping control as well as a positive result may lead to sanctions up to suspension.

I hereby agree to the publication of my registration data on the website of the German Athletic Association (www.leichtathletik.de) or websites of other national athletics associations respectively.

☐ YES ☐ NO

LIABILITY DISCLAIMER

By signing this Entry form, I accept and will perform my participation in these EVAA championships under the rules of IAAF / WMA / EVAA. Furthermore I relieve the organisers of any liability for any injury, loss or damage to myself or to my property that I may sustain in the course of the 18th European Veterans Athletics Championships-Stadia.

DATE

SIGNATURE

CLOSING DATE FOR ENTRIES - This Entry Form must be sent to the LOC body before: May 31 2012

Lokales Organisationskomitee des LASEM e. V.
Sachsenstr. 14
D-02763 Zittau

Germany

Fax +49 3583 752231

E-Mail: loc@evacs2012.com

The Entry Form is also available on www.evacs2012.com