 **Zápasnícky klub Mladosť, Olympionikov 4,**

 **971 01 P r i e v i d z a**

**SCHEDULE**

**2nd Women´s Cup**

**in Freestyle Wrestling**

**Organizer**  **:** ***Zápasnícky klub Mladosť Prievidza***

**Financial support : *The City of Prievidza,***

 ***Hornonitrianske bane a.s. Prievidza,***

**Date**  **11th-12th September 2015**

**Place**  CITY ARÉNA Prievidza, Olympionikov 2

**Tournament Director** Vladimír Laco, President of ZK Mladosť Prievidza

**Org. officer**  Vlasta Švikruhová, Clerk of ZK Mladosť Prievidza

 ul. Bojnická cesta 39A, 971 01 Prievidza, č. tel. 046/5430 335

 Mobile : +421 915 867 076

**Doctor**  MUDr. Lubomir Kletcko

**Judge**  Mgr. Martin BULKO

**Referees** will be nominated by Commitee of Referees

**Invited Competitors** wrestling teams from Slovakia, Czech Republic, Poland, Hungary,

Serbia, Austria, Bulgaria, Croatia, Germany, Bosnia and Herzegovina, Ukraine, Slovenia, Macedonia,

**Applications**  Please send your application form with number of competitors and accomodation request until **02.09.2015 on enclosed application**

 **form** to the following address:

 Zápasnícky klub Baník, Bojnická cesta 39A, 971 01 Prievidza

 or via e-mail : zkbanik@mail.t-com,

 or via phone/fax: +421 46 5430 335

**Fees**  3 € per wrestler, valid only for wrestlers from Slovakia

**Payment** Wrestling teams from Slovakia will participate at their own expense.

Financial issues of delegated referees will be paid in accordance with the directive of SZZ. **We pay accomodation and food for wrestlers from foreign countries of maximum 10 people.**

**Start conditions: -** valid license card

 **-** foreign wrestlers: passport, identity card

**Restriction**  ***Women´s*** ***Categories of Cadets and Seniors***

 Method of elimination by official UWW rules.

 In case of 5 or less wrestlers in category will be used Nordic system.

**Categories**

 **cadets**: year of birth 1998, 1999, / 2000 with medical and parent

 autorization /

weight categories: **46, 49, 52, 56, 60, 65** kg

 tolerance 1 kg

 **seniors**: year of birth 1997 and older / 1998 with medical and parent

 autorization /

 weight categories: **63, 69 kg**

 tolerance 2kg

**Prizes** The first three wrestlers in each weight category will receive a medal, a diploma and a prize according to their ranking.

 The first three wrestling teams will receive a diploma and a cup.

**Time schedule**

**11th September 2015 – Friday** - 16.00 – 17.00 – Registration of participants

 17.00 – 17.30 - Medical control and weigh-in

 19.00 – banquet for leaders and trainers

 of wrestling teams

**12th September 2015 – Saturday** – 08.00 – 09.00 a.m. - Registration of participants

 09.00 - 09.30 a.m. - Medical control and weigh-in

 09.30 – 10.00 a.m. – Table schedules

 10.00 – 10.30 a.m. - Consultation of referees, trainers and leaders of wrestling teams

 10.30 a.m. - Opening ceremony

**13th September 2015 – Sunday** - leaving of foreign wrestling teams

**Attention**  Changing the schedule is possible in agreement with Tournament Director and with Judge.

 The organizer is not liable for loss of goods or personal property.

JUDr. Katarína Macháčková v.r. Vladimír L a c o  v.r.

 City Mayor of Prievidza President of ZK Mladosť

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 **971 01 P r i e v i d z a**

**SCHEDULE**

**2nd Women´s Cup**

**in Freestyle Wrestling**

**INFORMATÍVNA PRIHLÁŠKA / INFORMATIVE REGISTRATION**

|  |  |
| --- | --- |
| ZK-ZO/Verein/Club : |  |
| Zápasník/wrestler : |  |
| Tréner/Trainers : |  |
| Rozhodca/Kampfrichter/Referee : |  |
| Vedúci/Mannschaftsführer/Coach  |  |
| Celkový počet výpravy/ Total number of the participants : |  |

Dátum/ Date : ……............................………………………

Adresa : Zápasnícky klub Baník, Bojnická cesta 39A, 971 01 Prievidza,

 č. tel./fax.: 046/5430 335, e-mail : zkbanik@mail.t-com.sk

Address: Zápasnícky klub Baník, Bojnická cesta 39A, 971 01 Prievidza or to phone

 number/fax number: + 421 (0)46 5430 335, e-mail : zkbanik@mail.t-com.sk