



# EUROPEAN GRAND PRIX 2<sup>nd</sup> Leg, 19 - 24 May 2009, SOFIA - BULGARIA

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Bulgaria, 1040 Sofia, 75 "Vasil Levsky" blvd.; Tel; +359 2 9300625,  
Fax +359 2 9300625, www.archery.bg, E-mail: info@archery.bg

## *INVITATION*

**To all Member Associations**

**Dear Member Associates,**

On behalf of the Organizing Committee of the Bulgarian Archery Federation (BAF) we would kindly like to invite you to take part in the 2<sup>nd</sup> Leg of the EMAU-Grand Prix, which is to be held in May 19 – 24, 2009 in Sofia – Bulgaria. This is to be the Second Round of the European Circuit for the current year.

Enclosed you will find the Tournament information needed cum the necessary documents concerning registration and participation in the event.

We will be very happy to meet and warmly welcome you in Sofia.

Sincerely yours,

**Daniel Pavlov**  
President  
Bulgarian Archery Federation



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## ***TOURNAMENT INFORMATION AND REQUIREMENTS***

### Preliminary programme:

	Sunday, May 17th	Arrival of Nations
	Monday, May 18th	Arrival of Nations
Day 1	Tuesday, May 19th	Official Training Team Captains meeting Opening Ceremony
Day 2	Wednesday, May 20th	Qualifications - FITA Round - 4 distances for all categories
Day 3	Thursday, May 21st	Individual - Elimination 1/32 to 1/4 Recurve & Compound (Men & Women)
Day 4	Friday, May 22nd	Team Eliminations and Finals
Day 5	Saturday, May 23rd	Individual finals ½ finals – Bronze & Gold medal matches in all divisions Medals Ceremony - Banquet
Day 6	Sunday, May 24th	Departure of Nations

- Maximum six (6) archers are allowed to enter the competition per category and per division.

Please note if you have not finalized on the exact number of the teams and archers yet, then only send the total number of the athletes. The precise names may be updated later.



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## Accommodation:

<b>4**** Hotel</b>		
<b>King's Village</b>	Single	105 – Euro
Spa Centre	Double	80 – Euro

(All inclusive)

<b>4 ****Hotel</b>		
<b>Silver House</b>	Single	95 – Euro
	Double	70 – Euro

(All inclusive)

The tournament will be organized and held on the premises of the **King's Village - Spa Centre 4\*\*\*\* hotel** itself. Hotel's prices include: bed, breakfast, lunch, dinner on the spot. The rates are in Euro per person and per day. Personal insurance is also provided for each athlete. A free parking place is provided to each hotel guest. Free Wi-Fi.

The hotel's outdoor sports facilities will be available for the smooth running of the whole tournament.

Email: [www.tsarskoselo-bg.com](http://www.tsarskoselo-bg.com)

**The Silver House hotel** offers a range of facilities available for the tournament guests like:

Free parking places / Fitness gym-free admission / Free Wi-Fi.

The hotel is situated at three kilometers away from the Grand-Prix venue. Hotel's prices include: bed, breakfast, lunch, dinner on the spot. The rates are in Euro per person and per day.

Email: [www.hotelsilverhouse.com](http://www.hotelsilverhouse.com)

## Entry fees:

Individuals:	100 € / Archer
Teams:	100 € / Team
Officials:	40 € Official

## Transportation:

Sofia Airport

Sofia Central Railway Station

Sofia Central Bus Station

From airport, bus or railway station to the hotels – (arrival and departure): 20 € / person

Transportation from hotels venue /to and from/ will be free.



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## Visa:

For all nations that will need visa permits, please make sure to apply for such as early as possible in your country of origin before leaving. If our help is needed you may contact us immediately for we could send an official invitation over to the Bulgarian Embassy for further cooperation.

## Closing Party: Saturday , May 23 rd 2009

Opening: 08:00 p.m. till it never ends...

Everyone is awaited at the dinner - join the Party!

## Awards Ceremony:

It is required that each team should bring its National Anthem ( on a CD or on a pen-drive) and a country's Flag (90cm x 120cm approx).

## Pre-payments:

Booking will only be regarded valid as soon as a 50 % downpayment has been received by the Organising Committee, as required. The teams will be asked to present the prepayment receipts before the Committee on check-in. Full payments are to be made upon arrival while registering at the Tournament venue.

## To contact us:

**Email:** [info@archery.bg](mailto:info@archery.bg)

**Tel / Fax:** + 359 29300625;

**Mobile phone:** + 359 886697615;

**Web address:** [www.archery.bg](http://www.archery.bg)

Could you please return the forms within the deadlines required, as stated below:

<u>Preliminary entry forms:</u>	20 <sup>th</sup> March 2009
<u>Hotel booking forms:</u>	20 <sup>th</sup> March 2009
<u>Accommodation form:</u>	17 <sup>th</sup> April 2009
<u>Payment form:</u>	17 <sup>th</sup> April 2009
<u>Final entry form:</u>	17 <sup>th</sup> April 2009
<u>Transport form:</u>	17 <sup>th</sup> April 2009



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## ***PRELIMINARY ENTRY FORM***

NAME OF MEMBER ASSOCIATION:

Tel:

Fax:

E – mail:

**Return at the latest: 20<sup>Th</sup> March 2009**

NUMBER OF COMPETITORS (max 6 by category)

WOMEN:

MEN:

RECURVE:

COMPOUND:

NUMBER OF OFFICIALS / COACH

I hereby declare that our Member Association is in good standing and that all competitors and officials are covered in case of illness or accident and have signed the FITA Anti-Doping Agreement.

DATE: .....

SIGNATURE: .....  
*President / Secretary*



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## ***HOTEL BOOKING FORMS***

NAME OF MEMBER ASSOCIATION:

Tel:

Fax:

E – mail:

**Return at the latest: 20<sup>th</sup> March 2009**

### BOOKING REQUEST

	Hotel 4 * King's Village	Hotel 4 * Silver House
Number of Single Rooms:	<input type="text"/>	<input type="text"/>
Number of Double Rooms:	<input type="text"/>	<input type="text"/>
Total number of persons:	<input type="text"/>	<input type="text"/>

DATE IN: ..... DATE OUT: ..... Nbr. Nights: .....

We require that 50 % of the payment should be done beforehand and if possible before the above-mentioned date of 17<sup>th</sup> April, 2009.

**Payment must be sent to the following bank account:**

Bank Name: FIRST INVESTMENT BANK

International Banking Account Number (IBAN): BG13FINV91501203792590

Bank Identification Code (BIC): FINVBGSF

Bank account nominee: Bulgarian Archery Federation

DATE: .....

SIGNATURE: .....

*President / Secretary*



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## TRANSPORT FORM

NAME OF MEMBER ASSOCIATION:

Tel:

Fax:

E – mail:

**Return at the latest: 17<sup>th</sup> April 2009**

Total number of Archers:

Total number of Officials:

Means of Transportation (Please tick appropriate box)

### ARRIVAL

**Plane:** Airport: ..... Place: ..... Other: .....  
Flight No ..... From: .....  
Date: ..... Time: H ..... Mn .....

**Train:** Train No: ..... Arriving from: .....  
Date: ..... Time: H ..... Mn .....

**Car/Bus:** Date: ..... Time: H ..... Mn .....

### DEPARTURE

**Plane:** Airport: ..... Place: ..... Other: .....  
Flight No: ..... From: .....  
Date: ..... Time: H ..... Mn .....

**Train:** Train No: ..... Arriving from: .....  
Date: ..... Time: H ..... Mn .....

**Car/Bus:** Date: ..... Time: H ..... Mn .....

DATE: .....

SIGNATURE: .....  
*President / Secretary*





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## ***FINAL ENTRY FORM***

NAME OF MEMBER ASSOCIATION:

Tel:

Fax:

E – mail:

**Return at the latest: 17<sup>th</sup> April 2009**

LIST OF COMPETITORS (max. 6 in each category).

### **RECURVE**

#### **Women**

1. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

2. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

3. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

4. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

5. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

6. ....  
Last name, First name

.....  
Birth date (DD.MM.YYYY)

#### **Men**

1. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

2. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

3. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

4. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

5. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

6. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)





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**NAME OF MEMBER ASSOCIATION:**

## COMPOUND

### Women

1. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

2. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

3. ....  
Last name, First name

.....  
Birth date (DD.MM.YYYY)

4. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

5. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

6. ....  
Last name, First name

.....  
Birth date (DD.MM.YYYY)

### Men

1. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

2. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

3. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

4. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

5. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

6. ....  
Last name, First name

.....  
Birth date (DD,MM,YYYY)

### **TEAM CAPTAIN - Assistants and coaches**

1. ....

2. ....

3. ....

4. ....

5. ....

6. ....

I hereby declare that our Member Association is in good standing and that all competitors and officials are covered in case of illness or accident and have signed the FITA Anti-Doping Agreement.

DATE: .....

SIGNATURE: .....

*President / Secretary*



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## ***PAYMENT FORM***

**NAME OF MEMBER ASSOCIATION:**

Tel:

Fax:

E – mail:

**Return at the latest: 17<sup>th</sup> April 2009**

	Number	Cost	Total
Individual Subscription	.....	100 €	..... €
Team Subscription	.....	100 €	..... €
Officials	.....	40 €	..... €
Total entry fees ( A )			..... €
Total Transportation fees Airport/Railway/Bus Station – Hotels ( B )	.....	20 €	..... €
Total accomodation ( C )			..... €
Grand Total ( A+B+C )			..... €
Deposit 50% 17 <sup>th</sup> April, 2009			..... €
Balance due no later than 18 <sup>th</sup> May, 2009			..... €

**Payment must be sent to the following bank account:**

Bank Name: FIRST INVESTMENT BANK

International Banking Account Number (IBAN): BG13FINV91501203792590

Bank Identification Code (BIC): FINVBGSF

Bank account nominee: Bulgarian Archery Federation

DATE: .....

SIGNATURE: .....  
*President / Secretary*



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## ACCOMMODATION FORM

NAME OF MEMBER ASSOCIATION:

Tel:

Fax:

E – mail:

**Return at the latest: 17<sup>th</sup> April 2009**

4**** hotel King's Village Spa Centre	Number of rooms	Cost-price	Total
Single Rooms	.....	105 €	..... €
Double Rooms	.....	80 €	..... €
<b>TOTAL:</b>			..... €
4**** Silver House	Number of rooms	Cost-price	Total
Single Rooms	.....	95 €	..... €
Double Rooms	.....	70 €	..... €
<b>TOTAL:</b>			..... €

- **The rates are in Euro per person and per day.**  
(All inclusive)

**Payment must be sent to the following bank account:**

Bank Name: FIRST INVESTMENT BANK  
International Banking Account Number (IBAN): BG13FINV91501203792590  
Bank Identification Code (BIC): FINVBGSF  
Bank account nominee: Bulgarian Archery Federation

DATE: .....

SIGNATURE: .....  
*President/Secretary*



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## EMAU PARTICIPATION WAIVER AND COMPETITORS AGREEMENT

**EVENT: EUROPEAN GRAND PRIX 2<sup>nd</sup> Leg,  
19 – 24 May 2009, SOFIA - BULGARIA**

**Return at the latest: 17<sup>th</sup> April, 2009**

**This form needs to be signed by all the athletes before they can be accredited at the event. The event detailed in the document heading will be referred to as "The Event".**

As in any sporting event, athletes always run the risk of injury or worse. Archery is no different. Therefore, the following waiver is currently required for participation.

In consideration of my involvement in The Event, I acknowledge and agree that:

1. I understand that participation in archery competition may involve risk of bodily injury, including but not limited to paralysis, dismemberment or even death, as well as loss of or damage to property.
2. I fully understand such dangers and knowingly and freely assume all such risk, and
3. I for myself and on behalf of my heirs, assigns and next of kin, hereby release, hold harmless and promise not to sue EMAU, their Officers, Officials, Organisers, Agents, Sponsors and/or Employees and/or other representatives ("The EMAU Agents"), with respect to any and all such injury, paralysis, dismemberment, death and/or loss or damage arising from my participation in the except that which is resultant of gross negligence and/or willful or wanton misconduct by EMAU and/or EMAU agents.
4. I promise to abide by all EMAU rules, regulations, decisions and rulings, including without limitation all those relating to doping or use of drugs. I agree to submit all disputes or claims of any nature relating to the Event (including without limitation its conduct, sponsorship and my participation therein), EMAU rules, regulations, rulings and decisions on all subjects to binding arbitration before the Court of Arbitration for Sport under its statutes and regulations.
5. The sponsors of The Event and EMAU may use my photograph, image, name or nick name for the promotion of the Event, EMAU or archery events. EMAU Sponsors or Partners may use my name and likeness to describe any prizes given by Sponsors or Partners without implying any endorsement of their product or service. This use may not include any endorsement by me. I am free to negotiate these endorsements on my own.
6. I will accept any prizes or awards given to me by EMAU or the sponsors of The Event for my participation, and I will attend all special award ceremonies at which prizes or awards are presented.
7. If I am invited to attend a press conference by the EMAU Press Officer or his representative I will without any delay attend this conference. I acknowledge that by not doing so sanctions may be imposed.

Participant's name (print) \_\_\_\_\_

Participant's signature \_\_\_\_\_

Date \_\_\_\_\_



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FOR ATHLETES OF MINORITY AGE  
(under 18 years, or minor in his/her country at time of participation,)

This is to certify as parent/guardian of this participant, I have read, understood and approved the above participation waiver and competitors agreement and consent to his/her release of EMAU from all liabilities to his/her involvement in The Event and will ensure that she/he will respect the signed agreement.

Participant's name (print) \_\_\_\_\_

Parent/Guardian name (print) \_\_\_\_\_

Parent/Guardian signature \_\_\_\_\_

Date \_\_\_\_\_



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## **FITA ANTI-DOPING AGREEMENT**

*(FITA Constitution and Rules, Book 1, Appendix 12)*

### **EVENT: EUROPEAN GRAND PRIX 2<sup>nd</sup> Leg, 19 – 24 May 2009, SOFIA - BULGARIA**

I, as a member of a Member Association of FITA or participating in a FITA authorized or recognized event, hereby acknowledge and agree as follows:

1. I have received information on the FITA Anti-Doping Rules and had an opportunity to review them.
2. I consent and agree to comply with and be bound by all of the provisions of the FITA Anti-Doping Rules, including but not limited to, all amendments to the Anti-Doping Rules and all International Standards incorporated in the Anti-Doping Rules.
3. I consent and agree to the creation of my profile in WADA Doping Control Clearing House (ADAMS) and/or any other authorized National Anti-doping Organisations (NADOs) similar system under FITA's agreement for the sharing of information, and to the entry on my doping control and Therapeutic Use Exemptions related data in such systems.
4. I acknowledge and agree that FITA and its Member Associations have jurisdiction to impose sanctions as provided in the FITA Anti-Doping Rules.
5. I also acknowledge and agree that any dispute arising out of a decision made pursuant to the FITA Anti-Doping Rules, after exhaustion of the process expressly provided for in the FITA Anti-Doping Rules, may be appealed exclusively as provided in Article 13 of the FITA Anti-Doping Rules to an appellate body for final and binding arbitration, which in the case of International-Level Athletes is the Court of Arbitration for Sport.
6. I acknowledge and agree that the decisions of the arbitral appellate body referenced above shall be final and enforceable, and that I will not bring any claim, arbitration, lawsuit or litigation in any other court or tribunal.
7. I have read and understood this Acknowledgement and Agreement.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name (Last Name, First Name)

\_\_\_\_\_  
Date of Birth  
(Day/Month/Year)

\_\_\_\_\_  
Signature (or, if a minor, signature of  
legal guardian)