

# XII BELGRADE DIVING TROPHY A,B,C,D CATEGORIES APRIL 04-05.2015. Belgrade, Serbia BELGRADE DIVING ASSOCIATION

BELGRADE DIVING ASSOCIATION SERBIAN DIVING ASSOCIATION

### Welcome:

The Belgrade Diving Association and Serbian Diving Association are pleased to invite the your team/federation to participate in the "13<sup>th</sup> International Belgrade Diving Trophy" to be held in Belgrade on April 04-05.2015. Belgrade Trophy is included in LEN 2015 competition calendar.

### **Organizing Committee:**

Belgrade Diving Association Address: Blagoja Parovića 150, Belgrade Tel/Fax: +381 64 2971469 E-mail to: <u>belgrade.diving.trophy@gmail.com</u> and Cc: <u>wolfman.73@live.com</u>

### Venue-Facilities:

The competitions will be held at the indoor swimming pool "Tašmajdan". Swimming pool is located in the heart of the city, Address: Ilije Garašanina 26, 11000 Belgrade

Two 1m springboards Duraflex B Two 3m springboards Duraflex B Platform 5m, 7.5m, 10m (3m wide). Dry land: mats, pits, somersoult bench. Pool depth 4,6 m



### **Competition Format:**

Competition will be held with accordance with FINA rule for <u>AGE CATEGORIES C, B,</u> <u>A, Senior</u> in following disciplines: springboards 1m, 3m and platform. <u>D CATEGORY</u> will be formatted as follow: springboard 1m, 3m, platform 3(5,4)+3. <u>E CATEGORY</u> will be formatted as follow: springboard 1m, 3m, platform 2(3,7)+2.

**Technical meeting:** Friday 3<sup>th</sup> April 18:30 PM at hostel (provisional)

Entry Fee: 7 € (per diver per event)

#### **PROVISIONAL** schedule :

FRIDAY 14.00-18.00 TRAINING 18.30 TEHNICAL MEETING SATURDAY 08.00-12.00 TRAINING and COMPETITION 16.00-17.00 TRAINING 17.00-17.15 OPENING CEREMONY 17.30-20.00 COMPETITION 21.00 OFFICIAL DINER SUNDAY 09.00-12.00 TRAINING and COMPETITION

Accommodation & transportation: We have arranged full board accommodation (walking distance from swimming pool). For each country we'll provide 3 gratis full board accommodation from dinner April 3<sup>th</sup> until breakfast April 6<sup>th</sup>. Extra nights and extra persons from 3<sup>rd</sup> till 6<sup>th</sup> of April will be charged 32€ for full board per day. Arrivals earlier than 03<sup>rd</sup> April will be charged extra. Payment should be made in cash to Organizing Committee. If you want to pay by bank transfer contact us. For all teams accommodated in official hostel will be provided local transport on arrival end departure from and to airport "Nikola Tesla", Belgrade train and bus station. For those who come with there own vehicle, will be provided safe parking place with 24 hour video security.

#### DEADLINES:

PRELIMINARY ENTRY: Please send preliminary entry form with number of participants as soon as possible how we can make accommodation booking. FINAL ENTRY: March 25<sup>th</sup>, by E-mail wolfman.73@live.com TRAVEL FORM: April 1<sup>st</sup>, by E-mail <u>belgrade.diving.trophy@gmail.com</u> DIVE LISTS: April 1<sup>st</sup>, by E-mail <u>wolfman.73@live.com</u>

If you have any further questions concerning the meet, please do not hesitate to contact us.

XII BELGRADE DIVING TROPHY Belgrade, Serbia April 4-5.2015

# Preliminary Entry Form

FEDERATION (club):		×	
( )			-

Tel: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail:

Number of Male Divers:	
Number of Female Divers:	
Number of Officials (delegates, coaches, etc.)	
Others:	
Total Number of Persons:	

Date \_\_\_\_\_

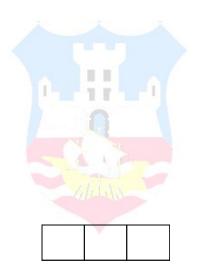
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Signature of President or Secretary of Federation

Please submit this form <u>as soon as possible</u> and send to:

and Cc:

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# FINAL Entry Form

FEDERATION (club):

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail:

N≌	Name	m/f	AB CD	1m,3m,H (position)	Date of birth
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Date		I	Stamp	)	1

Signature of President or Secretary of Federation

Please submit this form by 25<sup>th</sup> April and send to:

and Cc:

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# TRAVEL DETAILS

FEDERATION (club):

Tel: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail:

ARRIVAL				
Date and time of Arrival:	Airport / Station:	Airline & Flight Number:	Total Number of Persons:	

DEPARTURE				
Date and time of Departure:	Airport / Station:	Airline & Flight Number:	Total Number of Persons:	

Date \_\_\_\_\_

Stamp \_\_\_\_\_

Signature of President or Secretary of Federation

Please submit this form <u>by 1<sup>st</sup> April</u> and send to:

and Cc: