



GAM NESTLE NESQUIK CUP 2009

**INTERNATIONAL INTERCLUB SYNCHRONIZED
SKATING COMPETITION**

10.01 - 11.01.2009

TORUŃ, POLAND





GAM NESTLE NESQUIK CUP 2009

ORGANISER:

**Figure Skating Club MKS "AXEL" Toruń
ul. Szosa Chełmińska 177-181
www.axeltorun.pl**

DATE:

10.01 – 11.01.2009

CLOSE OF ENTRIES: 01.12.2008

PLACE:

**Ice-rink in Toruń
Gen.J.Bema str. 23/29
(indoor ice-ring, size 30m x 60m)**

DIRECTOR:

**Marek Kaliszek
e-mail: marek.kaliszek@mentor-sa.pl.**

SECRETARY:

**axel@axeltorun.pl
87-100 Toruń ul. Szosa Chełmińska 177-181
tel. 48 56-6693310
fax. 48 56-6693304**

OFFICIALS

COORDINATOR:

**Aniela Hebel – Szmak
e-mail: aszmak@poczta.onet.pl**





EVENTS:

Junior – (ISU)

Novice - (ISU)

ENTRIES: entries must contain team's full name, and requirement for accommodation. Entries should reach the Secretary by 01 December 2008. Organiser will be send affirmative entries by 15 of December 2008.

RESPONSABILITY: in accordance to ISU Constitution, rule 119, all participants act at their own responsibility. The organiser will provide medical emergency aid during the competition.

MUSIC: music will be reproduced from the cassette player (normal speed) or CD.

AWARDS: the three best placed teams of each event will get special gift, the others diplomas.

CHARGES: 150 EUR,

JUDGES: each ISU Member may nominate one ISU or International Judge, this judge has to be on the list of judges published in ISU Communication number 1525. The organiser may decide about the composition of the panel of judges. The organiser will provide and cover expenses for rooms and meals from 07.01.2009 to 11.01.2009. Organiser will be send affirmative entries by December 17th ,2008.

CALCULATION OF RESULTS: New Judging System (ISU)

ACCOMODATION: all participants, have to pay the accommodation by themselves, but we recommend the Hotel "Filmar" with special offer for the participants of the competition (look www.axeltorun.pl).

Toruń ul.Grudziądzka 45; tel.: +48 (0) 56 61 94 800

e-mail: recepca@hotelfilmar.pl

Officials (Reff., Judges, TC, TS and D&V/O) will be accommodated in the hotel "FILMAR".

We suggest to make the reservation as soon as possible.





GAM NESTLE NESQUIK CUP 2009

**Please complete this form in BLOCK CAPITALS
(this form must return before: 01.12.2008)**

Name of the club _____

Address _____

tel _____

fax _____

e-mail _____

City _____

Country _____

We would like to enter the following Teams:

Category **Novices**

Name of Team

Skaters

Name	Surname	Date of birth
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____





11.		
12.		
13.		
14.		
15.		
16.		
17.		
18.		
19.		
20.		

Category **Junior**

Name of Team

Skaters

Name	Surname	Date of birth
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
18.		
19.		
20.		
21.		
22.		
23.		
24.		





Coach _____

Team Leader _____

Judge(name and category)_____

Signature of Club Officer _____

Title _____

Print Name _____

