**EUBC CHAMPIONSHIPS**

**COMPETITION MANAGER REPORT**

**(in English only)**

Name of Championships:

Host National Federation:

Competition Period:

Competition Venue (Name and Address):

Technical Delegate:

EUBC Competition Manager:

Participation:

|  |  |  |  |
| --- | --- | --- | --- |
| Number of NFs | Total Number of Boxers | Men/Boys | Women/Girls |
|  |  |  |  |

|  |  |
| --- | --- |
| R&Js | ITOs |
|  |  |

Photo of Event Logo

**Please put your remarks and observations about the following:**

1. **VENUE**

FOP

R&J and ITO Lounges

VIP Lounge

EUBC Office

Warm-up area

Locker Rooms

Medical Room

Anti-doping Room

Equipment Storage area / Equipment Manager area

Training Venue

Floor plan zoning and flow of athletes and officials

1. **OFFICIAL PROCEDURES**

Sport Entries Check

Technical Meeting

Official Draw

Medical Examination and Weigh-In

Session Schedule

Opening Ceremony

Medal Ceremony

Closing Ceremony (if applicable)

1. **EQUIPMENT**

Name (brand) of gloves, headguard:

Name of Scoring System:

1. **ACCOMMODATION**

Number and names of Team Hotels

Officials Hotel

VIP Hotel

NF Representatives Hotels

Overall conditions of all hotels:

1. **MEALS**

(Please provide overall comments on the menu, time of breakfast, lunch, dinner, etc.)

1. **TRANSPORTATION**

(Comments on punctuality of transport, logistics, distance of hotel to venue, etc.)

1. **INFORMATION SYSTEM FOR PARTICIPANTS**

(Notice boards, WhatsApp groups, etc.)

1. **LOC WORK FORCE**

(Comments on LOC personnel, Volunteers, Security, NTOs, etc.)

1. **MEDICAL SERVICES**

(Comments on ambulance, nearest hospital to venue, local doctors)

1. **ACCREDITATION CENTER AND ACCREDITATION PROCESS**
2. **ANTI-DOPING**
3. **FINAL COMMENTS**

Signature: Date:

**Important Notice:**

Report must be sent to:

EUBC Office: office@eubcboxing.org

Competition Committee Chair: maxbox27@mail.ru