**EUBC CHAMPIONSHIPS**

**COMPETITION MANAGER REPORT**

**(in English only)**

Name of Championships:

Host National Federation:

Intended Competition Period:

Competition Venue (Name and Address):

EUBC Competition Manager:

Photo of Event Logo (if ready):

**Please put your comments about the following:**

1. **VENUE –**

FOP area

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

1. **ROOMS FOR OFFICIAL PROCEDURES**

Sport Entries Check

Technical Meeting

Official Draw

Medical Examination and Weigh-In

1. **ACCOMMODATION**

Number and names of Team Hotels

Officials Hotel

VIP Hotel

NF Representatives Hotels

Overall conditions of all hotels:

1. **MEALS/RESTAURANTS**
2. **TRANSPORTATION**
3. **LOC WORK FORCE**

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

1. **MEDICAL SERVICES**

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

1. **ARRANGEMENT FOR ACCREDITATION CENTER AND ACCREDITATION PROCESS**
2. **FINAL COMMENTS**

Signature: Date:

**Important Notice:**

Report must be sent to:

EUBC Office: office@eubcboxing.org

Competition Committee Chair: maxbox27@mail.ru