



## PRELIMINARY ENTRY FORM

PLEASE RETURN THIS FORM BY **1<sup>st</sup> December 2018**

ISU MEMBER : _____ Country _____		
City: _____		
No. and name of Participating ISU Category Teams:	SENIOR	
	JUNIOR	
	ADVANCED NOVICE	
Estimated number of people including Coaches, Manager and Staff (max 5 persons for each team):		

For ISU Categories N° JUDGE/S:		
Estimated date of arrival:		
Estimated date of departure:		

Signature of Team Official: And Name in Capitals	
	Position of Team Official and Date:

Please indicate if you require Unofficial Practice Ice on Thursday 7<sup>th</sup> February and how many blocks you would ideally like to book.

The Unofficial Practice Ice is in 15 minute Blocks @ £30:00 per Block.

I would like to reserve \_\_\_\_\_ Blocks

Practice ice may be available Tues/Wed 5/6<sup>th</sup> Feb. To book ice on these dates please apply to [trophydecosse2019@gmail.com](mailto:trophydecosse2019@gmail.com)

Please email this form to [trophydecosse2019@gmail.com](mailto:trophydecosse2019@gmail.com)  
or by mail to the Chairman, Trophy D'Ecosse 2018, Dumfries Ice Bowl, King Street, Dumfries. DG2 9AN



<b>OFFICIAL ENTRY FORM</b>
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8-10<sup>th</sup> February 2019**A separate entry form must be submitted for each team entered****DEADLINE 1<sup>st</sup> January 2019****Please fill it in type or write in capital letters.**

	Please tick
<b>SENIOR</b>	
<b>JUNIOR</b>	
<b>ADVANCED NOVICE</b>	

ISU MEMBER	
TEAM NAME:	
COUNTRY:	
NAME OF CLUB/RINK:	
TEAM LEADER/ MANAGER/OFFICIAL NAME & ADDRESS + ZIP CODE (UK POST CODE)	<hr/> <hr/>
	EMAIL <span style="float: right;">CONTACT NO:</span>
TEAM COACH: NAME (IN CAPITALS) AND SIGNATURE	

**CLOSING DATE FOR THIS EVENT IS 1<sup>ST</sup> JANUARY 2019****SK8scotland reserves the right whether or not to accept late or incomplete entries****PAYMENT DETAILS****BANK TRANSFER Transfer Amount £ \_\_\_\_\_ MADE ON (DATE)**

**PLEASE MAKE PAYMENT BY DIRECT BANK TRANSFER – DETAILS ON PAGE 3 OF THE ANNOUNCEMENT**  
**SEPARATE ENTRY FORMS ARE REQUIRED FOR EACH TEAM BUT A PAYMENT SUMMARY FORM (8) IS**  
**AVAILABLE FOR THOSE ENTERING MORE THAN ONE TEAM.**



## TEAM MEMBERS

**A separate entry form must be submitted for each team entered**

**DEADLINE 1<sup>st</sup> January 2019**

**Please fill it in type or write in capital letters.**

Please enter Synchronized team members in alphabetical order followed by alternates.

Please indicate team captain with an asterisk. \*

If you are submitting a handwritten form please write in capitals or very clearly – thank you.

**TEAM NAME** \_\_\_\_\_ **CATEGORY** \_\_\_\_\_

Name: (please indicate male skaters with M)	Date of Birth			Citizenship
	D	M	Y	
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				

The undersigned ISU Member Association hereby certifies that the above mentioned Team is eligible in accordance with ISU Regulations.

<b>Place &amp; date:</b>	<b>Signature:</b>	<b>Title:</b>
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**JUDGES ENTRY FORM****DEADLINE 1<sup>st</sup> January 2019****Please fill it in type or write in capital letters.**

ISU MEMBER: \_\_\_\_\_

COUNTRY: \_\_\_\_\_

NOMINATED JUDGE: \_\_\_\_\_

Phone: \_\_\_\_\_ Mob: \_\_\_\_\_

e-mail : \_\_\_\_\_

**ARRIVAL**

Time and date of arrival \_\_\_\_\_

Arrival by : Air  Train  Bus  Car 

Place of arrival:

Airport: \_\_\_\_\_ Flight number: \_\_\_\_\_

Station: \_\_\_\_\_ Train from: \_\_\_\_\_

Bus Station: \_\_\_\_\_ Bus from: \_\_\_\_\_

Other: \_\_\_\_\_ Car from: \_\_\_\_\_

**DEPARTURE**

Time and date of departure: \_\_\_\_\_

Departure by : Air  Train  Bus  Car 

Airport: \_\_\_\_\_ Flight number: \_\_\_\_\_

Station: \_\_\_\_\_ Train from: \_\_\_\_\_

Bus Station: \_\_\_\_\_ Bus from: \_\_\_\_\_

Other: \_\_\_\_\_ Car from: \_\_\_\_\_

**PLEASE LET THE ORGANISING COMMITTEE KNOW IF YOU PLAN TO TRAVEL TOGETHER WITH THE TEAM**

NAME & DATE:	TITLE:	SIGNATURE:

**MUSIC AND PRESS INFORMATION****DEADLINE 1<sup>st</sup> January 2019****Please fill it in type or write in capital letters.**

ISU MEMBER: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

TEAM: \_\_\_\_\_

TEAM MANAGER: \_\_\_\_\_

CATEGORY: SENIOR  JUNIOR  ADVANCED NOVICE 

All music must be on CD with the Team's name, event and the length of the music (not the skating time) clearly indicated. A spare copy should be readily available at rinkside.

**Cassette tapes will not be accepted.****SHORT PROGRAM**

	Music	Composer	Time (min)
1			
2			
3			

**FREE PROGRAM**

	Music	Composer	Time (min)
1			
2			
3			

**TEAM INFORMATION: MAIN RESULTS**

<b>National Championships</b>	2014	2015	2016	2017	2018
<b>International Competitions</b>	2014	2015	2016	2017	2018

**NOTE: A TEAM PHOTOGRAPH IS REQUIRED FOR THE PROGRAMME AND POSSIBLY THE PRESS.****PLEASE SEND IT TOGETHER WITH THE ENTRY FORM & SIGNED CONFIRMATION ON FORM 9****The requested information may be used for press and media**

Place & date:	Signature:	Title:

**PAYMENT SUMMARY****DEADLINE 1<sup>st</sup> January 2019****Please fill it in type or write in capital letters.**

TEAM NAME: \_\_\_\_\_

CATEGORY:

	Please tick
SENIOR	
JUNIOR	
ADVANCED NOVICE	

COUNTRY: \_\_\_\_\_

ENTRY FEE	Price		
SENIOR/JUNIOR TEAM	£425.00		
ADVANCED NOVICE TEAM	£395.00		
<b>EXTRA PRACTICE ICE</b>			
Subject to availability for Club International Entries	<b>Price</b>	<b>Number of Blocks to be reserved</b>	
Dumfries Ice Bowl Each 15 MIN block	£30.00	...	
<b>TOTAL AMOUNT (GBP)</b>			

<b>NAME &amp; DATE:</b>	<b>TITLE:</b>	<b>SIGNATURE:</b>

All Payments should be made by Direct Bank Transfer to the following account:

**Clearly indicate Trophy D'Ecosse 2019 / name of Team / Country****Bank:** Bank of Scotland, 8 Lochside Avenue, Edinburgh EH12 9DJ**Account Name:** NISA Scotland**Sort Code:** 12-24-81**Account Number:** 06199357

International Entries should additionally quote:

**BIC Code:** BOFSGBS1BBL**IBAN No:** GB34 BOFS 1224 8106 1993 57*For further details please refer to the Page 3 of the Announcement*





**DECLARATION FOR COMPETITORS AND OFFICIALS ENTERING ISU EVENTS**

**DEADLINE 1<sup>st</sup> January 2019**

**Please fill it in type or write in capital letters.**

I /we, the undersigned  
(full name of Competitor or Official) :

born on (day, month, year) :

Residing at (full address) :

entered by (name of ISU Member federation and name and title of the authorized ISU Member Representative such as President, General Secretary, Executive Director, CEO as per Rule 104/4) -Not applicable for ISU appointed Officials :

On the occasion of (name/date of the ISU Event) : **TROPHY D'ECOSSE 2019/GBR**

hereby make the following declaration and confirm that it is applicable to all of the above-mentioned Competitor's or Official's activities, performances, services, rights and responsibilities in the above-mentioned ISU Event and in all other events and activities conducted under the auspices, sanction or jurisdiction of the ISU. Declarations of Competitors who have not reached the age of 18 (the age of majority in Swiss law which governs ISU matters) must be co-signed by at least one of the Competitor's parents or the Competitor's lawful guardian.

I/we, the undersigned,

- I) *accept the ISU Constitution, which establishes an ISU Disciplinary Commission (Article 24) and recognizes the Court of Arbitration for Sport (CAS), in Lausanne, Switzerland as the arbitration tribunal authorized to issue final and binding awards involving the ISU, its Members and all participants in ISU activities, excluding all recourse to ordinary courts (Articles 25 & 26); and*
- II) *accept the inclusion of the ISU Event in the television and other media exhibition arrangements entered into by the ISU pursuant to ISU Rule 105, and that the Competitor's performance(s) and all activity related to the ISU Event, may be filmed, televised, photographed, identified, and otherwise depicted, recorded and further exhibited and distributed worldwide under conditions and for the purposes now or hereafter authorized by the ISU in relation to promoting the Figure and Speed Skating sports; and*
- III) *confirm that the Competitor or Official entered is eligible to compete/officiate according to ISU Rule 102. (in the case of ineligible skaters entered in Open International Competitions to be crossed out and initialed by the ineligible skater); and*
- IV) *certify and warrant that for Figure Skating ISU Events the music and choreography presented and used by the Competitor in ISU Events or International Competitions have been fully cleared and authorized for public use and television broadcast and re-broadcast throughout the world without further clearances or payments of any kind on the part of ISU, the Organizing Member, the Organizing Committee or the relevant television network or broadcaster being required; and declare that I/we understand and will comply with ISU General Regulations, Rule 102 paragraph 6.a) for Figure Skating and respectively Rule 102, paragraph 6.b) for Speed Skating regarding the display and non-display of trademarks during ISU Events, including, but not limited to, prize-giving ceremonies, and recognize that negative consequences as outlined in ISU Communication 1514 titled "Uniforms/Racing Suits/Clothing" (or any update of this Communication) will result from non-compliance with its requirements.*

*I am familiar with the ISU Anti-Doping Rules (ISU Communication 1447 & 1448 or any update of these Communications) and also with the List of Prohibited Substances and Methods and I declare that I will fully comply with such Rules.*

Competitor or Official:	Date:		Signature:	
Competitor's parent or lawful guardian for Competitors who have not reached the age of 18:	Date:		Signature:	
ISU Member Representative: (not applicable for ISU appointed Officials)	Date:		Signature:	





**PHOTOGRAPHY and VIDEOING  
CONSENT FORM**

**IMPORTANT**

- By entering the event, there is an acceptance that the child/participant may be photographed and/or videoed, and that images may be published by Sk8scotland and/or the National Ice Skating Association, unless the non-consent form below states otherwise **THIS FORM MUST BE SIGNED AND RETURNED WITH THE ENTRY FORMS**
- This event will be judged under the ISU International Judging System which necessarily involves video to allow for video replay at the event. Skaters / parents / guardians may not opt out of this requirement as it is a condition of entry.
- Skaters, parents/guardians and Team Managers should be aware that Synchronized Skating is a TEAM event and the non-consent (to photography) for any one skater means that the entire team may not be photographed or videoed. In the event that the Team concerned achieves a podium place the skater concerned may choose not to join the team on the podium

**Non-consent by synchro parents requires a separate sheet for a parent/guardian of each skater under 18”**

**EVENT:**

**ISU INTERNATIONAL  
TROPHY D'ECOSSE 2019  
Incorporating  
SCOTTISH SYNCHRONIZED SKATING CHAMPIONSHIPS**

- I **DO** consent to the taking of photographs/video (other than for purpose of IJS) by the Sk8scotland Official Photographer/Videographer at the event named above

**Skater Name:**.....**Team:**.....

Signed (Parent/Guardian): ..... Date: .....

**Manager:** I acknowledge the above consent and confirm that video/photography (other than for IJS) of the entire team may be permitted

Signed (Team Manager): ..... Date: .....



**Program Content (SYNCHRO) - ELEMENTS IN ORDER OF SKATING**

**THIS FORM MUST BE RETURNED NO LATER THAN 1<sup>ST</sup> JANUARY 2019**

Please fill in the elements sheet below in the correct order. PLEASE USE THE OFFICIAL ELEMENT CODES. It is important that these forms are completed correctly for successful entry to this competition.

**Rink / Club:**

**Category:**     Senior     Junior     Advanced Novice

**TEAM:**

	<b>Time*</b>	<b>Elements SP</b> (Junior & Senior Teams only)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

	<b>Time*</b>	<b>Elements FS</b>
1		
2		
3		
4		
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Date, Signature Team Coach :

\_\_\_\_\_