



**Official Nomination Form**

Preliminary: **19 May 2023**

Final: **27 June 2023**

The International Powerlifting Federation and Lebanese Powerlifting Federation invite the IPF Arab member nations to the

**IPF ARAB CLASSIC POWERLIFTING CUP**

Tuesday 18<sup>th</sup> July to Saturday 22<sup>nd</sup> July 2023

Beirut, Lebanon

**The preliminary and final nomination forms must be sent to:**

**Meet Director:** Hassenen Moukaled – email: lebanon\_bbp@hotmai.com Tel: +96170747473

**Copy IPF Championship Secretary:** Gaston Parage, 3, route D’Arlon, L-8009 Strassen, Luxembourg  
phone : +352-621165214 fax : +352-582696  
e-mail : [Gaston.Parage@powerlifting.sport](mailto:Gaston.Parage@powerlifting.sport)

**VISA:** Hassenen Moukaled – email: lebanon\_bbp@hotmai.com Tel: +96170747473

**Arrivals/Departure:** Hassenen Moukaled – email: lebanon\_bbp@hotmai.com Tel: +96170747473

**Transport:** Hassenen Moukaled – email: lebanon\_bbp@hotmai.com Tel: +96170747473

Submitted by \_\_\_\_\_ National Powerlifting Federation

Submitting officer: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Team Manager : \_\_\_\_\_ Coach \_\_\_\_\_

Referee 1 : \_\_\_\_\_ Cat : \_\_\_\_\_ Available for categories: \_\_\_\_\_

Referee 2 : \_\_\_\_\_ Cat : \_\_\_\_\_ Available for categories: \_\_\_\_\_

Referee 3 : \_\_\_\_\_ Cat : \_\_\_\_\_ Available for categories: \_\_\_\_\_

Referee 4 : \_\_\_\_\_ Cat : \_\_\_\_\_ Available for categories: \_\_\_\_\_

Total number of lifters: \_\_\_\_\_ Total amount of \_\_\_\_\_ Arrival : \_\_\_\_\_ Flight/train/car

Arrival time: \_\_\_\_\_ On airport/station: \_\_\_\_\_ Flight nr: \_\_\_\_\_

Departure time: \_\_\_\_\_ Time: \_\_\_\_\_ Flight nr: \_\_\_\_\_

**We need rooms:** \_\_\_\_\_ **Single** – from – to: \_\_\_\_\_ **Double** – from – to: \_\_\_\_\_

**Nomination Guidelines**

Each referee must state which category they will be available to referee. He/she must referee in the stated categories they're nominated for to be available for. If available categories are not stated, he/she is obliged to referee in categories decided by the Technical Committee.

**It is an obligation of every Federation to confirm the participation of all their Referees nominated in the Final nomination or cancel the referees who will not participate in the Championship.**



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Latest date for changes of categories for which has been allocated by the championship secretary must be made latest 21 days prior to the Technical Meeting of the competition. If referees do not indicate changes to the Championships Secretary during that time, referees are obliged to be available for the original categories stated on IPF website on "Referees/Jury duty" section.

All nominated referees attending a championship, must be available to referee for at least two days.

State each lifter's personal best achieved at national or international championships during the previous 12 months. Enter the lifter's family name and first name separately into an appropriate column below.

**NOMINATION FORM**

***Please, use each lifter's full first name, not his or her nickname!***

**Women Open**

Class	Family Name	First Name	Birthday	BP	TOTAL

**Reserve lifters, max. 5 per**


**Women Sub-Junior**

Class	Family Name	First Name	Birthday	BP	TOTAL

**Reserve lifters, max. 5 per**




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**Women Junior**

Class	Family Name	First Name	Birthday	BP	TOTAL

**Reserve lifters, max. 5 per**


**Women Master 1**

Class	Family Name	First Name	Birthday	BP	TOTAL

**Reserve lifters, max. 5 per**


**Women Master 2**

Class	Family Name	First Name	Birthday	BP	TOTAL

**Reserve lifters, max. 5 per**




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**Women Master 3**

Class	Family Name	First Name	Birthday	BP	TOTAL

**Reserve lifters, max. 5 per**


**Women Master 4**

Class	Family Name	First Name	Birthday	BP	TOTAL

**Reserve lifters, max. 5 per**


**Men Open**

Class	Family Name	First Name	Birthday	BP	TOTAL

**Reserve lifters, max. 5 per**




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**Men Sub-Junior**

Class	Family Name	First Name	Birthday	BP	TOTAL

**Reserve lifters, max. 5 per**


**Men Junior**

Class	Family Name	First Name	Birthday	BP	TOTAL

**Reserve lifters, max. 5 per**


**Men Master 1**

Class	Family Name	First Name	Birthday	BP	TOTAL

**Reserve lifters, max. 5 per**




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**Men Master 2**

Class	Family Name	First Name	Birthday	BP	TOTAL

**Reserve lifters, max. 5 per**


**Men Master 3**

Class	Familv Name	First Name	Birthday	BP	TOTAL

**Reserve lifters, max. 5 per**


**Men Master 4**

Class	Family Name	First Name	Birthday	BP	TOTAL

**Reserve lifters, max. 5 per**




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**ACCREDITATION OF FEDERATION OFFICIALS**

Full and Complete Name	Federation Title

**ACCREDITATION OF FEDERATION COACHES**

Full and Complete Name	Federation Title

**ACCREDITATION FOR FEDERATION TEAM DOCTOR OR PHYSIOTHERAPIST**

Full and Complete Name	Federation Title

**Full and complete Name of team doctor or physiotherapist – **must** provide documentation to prove their qualifications.**  
Team doctor or physiotherapist **must** sit in the audience until they are required to go to the Warm-up/wrapping area to attend to their athlete if any injury occurs.

