





#### OFFICIAL INVITATION

#### 2020 INTERNATIONAL PARALYMPIC JUDO GRAND PRIX

19th NOVEMBER 2019.

Dear IBSA Member,

The Brazilian Confederation of Sports for the Visually Impaired (CBDV) hereby invites your judo delegation to take part in the International Grand Prix Judo Paralympic. The event will take place in São Paulo, Brazil; 18<sup>th</sup>-21<sup>st</sup> March 2020.

### **Organizer**

CBDV – Brazilian Confederation of Sports for the Visually Impaired.

Phone: +55 11 2548 0463

Email: maira@cbdv.org.br / felipemenescal@cbdv.org.br

## **Competition Programme**

DATE	TIME	ACTIVITY	PLACE			
18 <sup>th</sup> March	All day	Arrivals	Airport			
	11:30 – 15:00	Lunch	BPC Restaurant			
(Day 1)	18:30 – 21:00	Dinner	BPC Restaurant			
	6:30 - 9:00	Breakfast	BPC Restaurant			
19 <sup>th</sup> March	11:30 – 15:00	Lunch	BPC Restaurant			
	18:30 – 21:00	Dinner	BPC Restaurant			
(Day 1)	18:00 – 19:30	Official Weigh-in	Arena			
	20:00	Technical Meeting	Arena			
	6:30 - 9:00	Breakfast	BPC Restaurant			
	8:30	Opening Ceremony	Arena			
	8:45	Random weigh-in	Arena			
20 <sup>th</sup> March	9:00	Competition day	Arena			
(Day 2)	12:00	Awards Ceremony – Beginners Category	Arena			
	17:00	Awards Ceremony – Judo Grand Prix	Arena			
	18:30 - 21:00	Dinner	BPC Restaurant			
21 <sup>st</sup> March (Day 3)	by 11:00	Departures	BPC			

• On March 19th all delegations will be able to train during the day.







**Competition Venue**(There will be 3 competition areas and a warming up area)

# Brazilian Paralympic Training Center









## **Accommodation and Meals**

Brazilian Paralympic Training Center Hotel

Address: Rod. dos Imigrantes - Parque do Estado, São Paulo - SP, 04329-000





18<sup>th</sup> March → Lunch and dinner

19<sup>th</sup> March → full board

20<sup>th</sup> March → Breakfast, lunch (at the competition venue) and dinner

21<sup>st</sup> March → only Breakfast







## **PARTICIPANTS**

Blind and Visually Impaired Judokas (women/men); Classification B1, B2, B3.

Categories:

Beginner: Maximum graduation - orange belt

Senior: Over 16 years old

## **Deadlines**

1<sup>st</sup> entry form (Competitors Numerical Inscription) – by January 20<sup>th</sup>, 2020. 2<sup>nd</sup> entry form (Final nominal entry + Passport and Address) – February 20<sup>th</sup>, 2020. 3<sup>rd</sup> entry form (Travel Schedule) – March 10<sup>th</sup>, 2020.

## **Registration (forms)**

Please send all the entry forms to Ms. Maira Fiorentino – Executive Assistant.

Phone: +55 11 25480463 Email: <u>maira@cbdv.org.br</u>

Should you have any questions regarding the event do not hesitate to contact us.

## **Costs per Person:**

Price per person: 200 USD (18th – 21st march)

(The CBDV will send the invoice after receiving the 2<sup>nd</sup> entry form)

For arrivals and departures, the transfer service will be available from Guarulhos International Airport (GRU) to the competition venue/hotel.

All bank fees and bank transfer costs are to be paid by the participating National Federation to the following bank:

Beneficiary's Name: Confederação Brasileira de Desportos de Deficientes Visuais - CBDV

Bank Name: Banco Itaú Bank A/C No: 7307/35100-2

IBAN: BR43 6070 1190 0730 7000 0351 002C 1



FEDERATION: ADRESS:

TELEPHONE:

E-MAIL:

**CONTACT PERSON:** 



FAX:



## **FORM 1- COMPETITORS NUMERICAL INSCRIPTION**

Weight category Men	Participation Competition Yes / No	Nr Athletes		Weight category Women	Participation Competition Yes / No	Nr Athletes
-60 kg				-48 kg		
-66 kg				-52 kg		
-73 kg				-57 kg		
-81 kg				-63 kg		
-90 kg				-70 kg		
-100 kg				+70 kg		
+100 kg						
	Medics Physiothera Referees Team Offic	ipist sials		Male or F  Male or F  Male or F  Male or F  Male or F	Female Female	
Please sen	d this form by 2	0 January 2	<b>2020</b> to	the CBDV.		
DATE:		S	— ignatui	re of the head o	of the delegation a	and stamp of







FORM 2 – FINAL NOMINAL ENTRY
(If necessary, please complete more pages, IN CAPITAL LETTER!)

Country			
Officials	Last Name (Family name)	First name (Given name)	Male or
Function	zaot riamo (r animy riamo)	The name (Green name)	Female
Judokas	Last Name (Family name)	First name (Given name)	
-48 kg			
-52 kg			
-57kg			
-63 kg			
-70kg			
+70 kg			

# MEN/HOMMES/MÄNNER SENIORS

Judokas	Last Name (Family name)	First name (Given name)	
-60 kg			
-66 kg			
-73kg			
-81 kg			
-90 kg			
-100 kg			
+100 kg			







# PASSPORTS AND ADDRESS OF RESIDENCE

Last Name	Given Name	Passport No	Address of Residence

Please send this form by 20 Februar	y to the CBDV.
DATE:	Signature of the head of the delegation and stamp of the federation







## FORM 3 - TRAVEL SCHEDULE

#### **FEDERATION:**

## **ARRIVAL**

## PLANE:

Date	Time	Flight No.	From	То	No. of people

#### **DEPARTURE**

## PLANE:

Date	Time	Flight No.	From	То	No. of people

Please send this form by 10<sup>th</sup> March 2020 to the CBDV.