

PACKAGE SUMMARY

Form		Deadline
	Preliminary entry Form.....	November 25 th 2023
Form 1 :	Team Entry.....	December 23 rd 2023
Form 2 :	Team Contact.....	December 23 rd 2023
Form 3 :	Judges, Referees, Technicals, Operatory Entry.....	December 23 rd 2023
Form 4 :	Music and Press Informations.....	December 23 rd 2023
Form 5 :	Team Travel Informations.....	December 23 rd 2023
Form 6 :	Payment Summary.....	January 7 th 2024
Form 9 and 9B :	Planned Program Content.....	January 7 th 2024
Form 10 :	Meals Reservation.....	January 7 th 2024
Form 11 :	Extra Practice Ice.....	December 23 rd 2023
Form 12 :	Medical.....	January 7 th 2024

Organizing Committee - International French Cup

R.O.C – Patinoire Nathalie Pechalat – Avenue J. Chastelain

Ile Lacroix - 76100 Rouen - FRANCE

E-Mail : secretariat@frenchcup.fr & accreditation@frenchcup.fr

TEAM ENTRY
Announcement of participation

PLEASE RETURN THIS FORM BEFORE November 25, 2023

ISU MEMBER : _____

Country: _____

N° and name of participating Teams:	SENIOR	
	SENIOR ELITE 12	
	JUNIOR	
	NOVICE ADVANCED	

N° JUDGE/S:		
Estimated date of arrival:		
Estimated date of departure:		

Place & date:	Signature:	Title:

Please return this form as soon as possible

Return to:
Organizing Committee - International French Cup
R.O.C – Patinoire Nathalie Pechalat – Avenue J. Chastelain
Ile Lacroix 76100 Rouen - FRANCE
E-Mail : secretariat@frenchcup.fr & accreditation@frenchcup.fr



TEAM ENTRY

DEADLINE DECEMBER 23rd, 2023

Competitors list in alphabetical order. **Please indicate the Team Captain with "*"**

[illegible]

Return to:
Organizing Committee - International French Cup
 R.O.C Centre Sportif Guy Boissière - Esplanade du Docteur Duchêne
 Ile Lacroix 76100 Rouen - FRANCE
 E-Mail : contact@frenchcup.fr



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

Place and Date:	Signature:
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Return to:

Organizing Committee - International French Cup

R.O.C Centre Sportif Guy Boissière - Esplanade du Docteur Duchêne

Ile Lacroix 76100 Rouen - FRANCE

E-Mail : contact@frenchcup.fr

TEAM CONTACT

DEADLINE DECEMBER 23rd 2023

Please fill in with type or write in capital letters.

PLEASE NOTE:

**THIS FORM IS VERY IMPORTANT
TO ENABLE A PROMPT INFORMATION EXCHANGE**

Team Name: _____

Country: _____ Web-site: _____

Club Address: _____

Team Manager: (Mr. Mrs. Miss) _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

Team Leader: (Mr. Mrs. Miss) _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

Please return this form as soon as possible

Return to:

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JUDGES, REFERES, TECHNICALS, OPERATORY ENTRY FORM**DEADLINE DECEMBER 23rd 2023***Please fill in with type or write in capital letters.*

ISU MEMBER: _____

COUNTRY: _____

NOMINATED JUDGE: _____

Phone: _____ Fax: _____

e-mail : _____

ARRIVAL

Time and date of arrival: _____

Arrival by: ☐ Plane ☐ 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: ☐ Plane ☐ Train ☐ Bus ☐ Car

Place of departure:	
Airport:	Flight number:
Station:	Train from:
Bus Station:	Bus from:
Other:	Car from:

PLEASE LET THE OC KNOW, IF YOU TRAVEL TOGETHER WITH A TEAM IN THE BEST WAY POSSIBLE

Place and Date:

Signature:

Return to:**Organizing Committee - International French Cup**

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Ile Lacroix 76100 Rouen - FRANCE

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MUSIC AND PRESS INFORMATION

DEADLINE DECEMBER 23rd 2023

Please fill in with type or write in capital letters.

ISU MEMBER: _____ COUNTRY: _____

TEAM: _____

TEAM MANAGER: _____

CATEGORY: ☐ SENIOR ☐ SENIOR ELITE 12 ☐ JUNIOR ☐ ADVANCED NOVICE

SHORT PROGRAM

	Music	Composer	Time (min)
1			
2			
3			

FREE PROGRAM

	Music	Composer	Time (min)
1			
2			
3			

TEAM INFORMATION: MAIN RESULTS

National Championships	2018	2019	2020	2021
International Competitions	2018	2019	2020	2021

NOTE : A TEAM PICTURE IS REQUIRED FOR PRESS. PLEASE SEND IT TOGETHER WITH THE ENTRY FORM
The requested informations will be used for press and media (see Form 8).

Place and Date:

Signature:

Return to:

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Ile Lacroix 76100 Rouen - FRANCE

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TEAM TRAVEL INFORMATION

DEADLINE DECEMBER 23rd 2023

Please fill in with type or write in capital letters.

ISU MEMBER: _____

COUNTRY: _____

TEAM NAME: _____

CATEGORY: () SENIOR () SENIOR ELITE 12 () JUNIOR () NOVICE ADVANCED

HOTEL in Rouen

NAME: _____

ADDRESS: _____

PHONE: _____

Email: _____

ARRIVAL DATE: _____

Arrival in France:

DATE: _____

TIME: _____

Arrival in Rouen:

DATE: _____

TIME: _____

Plane: ☐ Train: ☐ Bus: ☐ Car: ☐

DEPARTURE DATE: _____

TIME OF DEPARTURE: _____

Place and Date:	Signature:
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Return to:

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Ile Lacroix 76100 Rouen - FRANCE

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PAYMENT SUMMARY**DEADLINE JANUARY 7th 2024***Please fill in with type or write in capital letters.*

TEAM NAME: _____

CATEGORY: () SENIOR () SENIOR ELITE 12 () JUNIOR () ADVANCED NOVICE

COUNTRY: _____

- ☐ 400 Euros without any free ice practice
- ☐ 500 Euros including half (1/2) an hour of free ice practice
- ☐ 600 Euros including one (1) hour of free ice practice

Please return this form with the payment

Check in Euros or Bank Transfer:

Rouen Olympic Club
Patinoire Nathalie PECHALAT
ILE LACROIX – Avenue Jacques Chastellain
76100 ROUEN France

Please note the detail of your payment:

	Name of team	Name of Bank	N° cheque	N° Bank Transfer
Entry fees				
Meals				
Total				

Return to:

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Ile Lacroix 76100 Rouen - FRANCE

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PLANNED PROGRAM CONTENT FORM

DEADLINE JANUARY 7th 2024

Please fill in with type or write in capital letters.

Team name:	Category:
Nation:	FREE SKATING

ELEMENTS IN ORDER OF SKATING DURING THE PROGRAM

1		17	
2		18	
3		19	
4		20	
5		21	
6		22	
7		23	
8		24	
9		25	
10		26	
11		27	
12		28	
13		29	
14		30	
15		31	
16		32	

Please fill in separate forms for the Short Program and Free Program

PLANNED PROGRAM CONTENT FORM

DEADLINE JANUARY 7th 2024

Please fill in with type or write in capital letters.

Team name:	Category:	
Nation:	SHORT PROGRAM	

ELEMENTS IN ORDER OF SKATING DURING THE PROGRAM

1		17	
2		18	
3		19	
4		20	
5		21	
6		22	
7		23	
8		24	
9		25	
10		26	
11		27	
12		28	
13		29	
14		30	
15		31	
16		32	

Please fill in separate forms for the Short Program and Free Program

MEALS RESERVATION

DEADLINE JANUARY 7th 2024

Please fill in with type or write in capital letters.

ISU Member:	
Category:	
Name of Team	
ADDRESS of HOTEL IN ROUEN	
Phone:	Fax:
PERSON TO CONTACT	

DAYS		LUNCH	DINER	TOTAL
THURSDAY February 1 st 2024	Warm meal Choice of dairy product Choice of dessert	15,00 € x ____ =	15,00 € x ____ =	_____ €
FRIDAY February 2 nd 2024	Warm meal Choice of dairy product Choice of dessert	15,00 € x ____ =	15,00 € x ____ =	_____ €
SATURDAY February 3 rd 2024	Warm meal Choice of dairy product Choice of dessert	15,00 € x ____ =	15,00 € x ____ =	_____ €
Total to pay in Euros				_____ €

First deposit

Method of payment:

Cheque (in Euros) ☐

Cash (in Euros) ☐

Bank Transfer ☐

If meals are canceled after January 14th 2024, they will not be refunded

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EXTRA PRACTICE ICE**DEADLINE DECEMBER 23rd 2023***Please fill in with type or write in capital letters.*

ISU Member	
Name of Team	
Category	
Phone	
PERSON TO CONTACT	

Extra practice ice can be reserved in blocks of 15 minutes.

*Upon decision of the organizing committee, based on arrival in Rouen and ice availability

If you wish more of Extra Practice, the Norman ice rinks can welcome you:

DATE	TIME

MEDICAL FORM

This form is valid for this Competition only

DEADLINE JANUARY 7th 2024

Please fill in with type or write in capital letters.

To improve medical care of each skater at ISU Events, in case of emergency, the ISU Medical Advisors request that the skaters fill out this form prior to the Event or at Registration/Accreditation of each event

ISU Member :	
Category :	
Name of the Team :	
NAME :	
PASSPORT NUMBER:	
MEMBER:	
EMERGENCY CONTACT NAME AND NUMBER:	
ALLERGIES:	YES / NO
If yes, what type (food, medications (penicillin or others), pollen, dust etc):	
CURRENT MEDICAL CONDITIONS:	
Please list the conditions and any medications required.	

One form for each Skater

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