



## WMRA WORLD LONG DISTANCE MOUNTAIN RUNNING CHALLENGE

### APPLICATION FORM

We hereby submit our application to stage the WMRA World Long Distance Mountain Running Challenge (hereinafter called the 'Challenge') 201.....

Name of IAAF member federation.

Telephone & e-mail.

We declare that we have read and fully understand the WMRA Regulations governing the Challenge and are prepared, by agreement with the Local Organising Committee (LOC) of the race described below, to fulfil all the requirements and obligations therein.

We certify that this form has been completed truly and accurately to the best of our knowledge and we understand that all information in this document is a binding part of the Event Organisation Agreement (EOA)

Signed on behalf of the federation: \_\_\_\_\_

Print: \_\_\_\_\_

Position: \_\_\_\_\_ Date \_\_\_\_\_

EVENT INFORMATION:

Name of the race into which the Challenge will be incorporated \_\_\_\_\_

Location of the event \_\_\_\_\_

Date of the competition \_\_\_\_\_

Cost of entering the competition \_\_\_\_\_

Give any alternative dates for the event if these are possible \_\_\_\_\_

Race record for men is \_\_\_\_\_

Race record for women is \_\_\_\_\_

Total height climbed is \_\_\_\_\_ Total height descended is \_\_\_\_\_

Race altitude minimum \_\_\_\_\_ Race altitude maximum \_\_\_\_\_

A map of the course is attached YES/NO A profile of the course is attached YES/NO

Does the course comply with the Regulations? YES/NO

If the answer is NO explain the non compliance \_\_\_\_\_

\_\_\_\_\_

Provide the names, country, and times of the men and women winners for the last 4 years:

Men

Women

\_\_\_\_\_ 200 \_\_\_\_\_

\_\_\_\_\_ 200 \_\_\_\_\_

\_\_\_\_\_ 200 \_\_\_\_\_

\_\_\_\_\_ 200 \_\_\_\_\_

RACE PRIZES:

What is the total amount of the race prize money on offer? \_\_\_\_\_

Indicate the level of prize money for each of the first 3 men 1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_

The first 3 women 1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_

**DOPING**

Give brief details of how you will comply with item 13 of the regulations;\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**MEDICAL**

Give brief details of how you will comply with item 14 of the Regulations.\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**INSURANCE.**

What arrangements have been/will be made to comply with item 17 of the Regulations.\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**SPONSORSHIP**

Give details of existing contractual arrangements with your race sponsors.\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**MEDIA**

Can you confirm that the event will be televised? YES/NO (enclose letter from the host broadcaster)

If YES will the broadcast be live? YES/NO Delayed? YES/NO

Will the broadcast be Local, National or International?\_\_\_\_\_

Name of the host broadcaster.\_\_\_\_\_

Who holds the TV rights connected to the race?\_\_\_\_\_

ACCOMMODATION

Please indicate what free accommodation, if any, will be offered to which athletes. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TRAVEL

Are you able to offer travel assistance to athletes as required in item 16 of the Regulations. YES/NO

Are you able to offer any further travel assistance YES/NO and if so how much? \_\_\_\_\_

\_\_\_\_\_

FINANCE

This application should be accompanied by a general financial budget.

RACE ORGANISATION DETAILS.

Chairperson of the race organisation (Print) \_\_\_\_\_

Secretary of the race organisation (Print) \_\_\_\_\_

Race office address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_ e-mail \_\_\_\_\_

Copies of this application with supporting documentation should be returned to

Bruno Gozzelino  
WMRA President  
Via Susa 23  
I - 10138 Torino  
Italy

Email: bgozzel@libero.it  
Fax: +39.(0)11.4343372