

# World Archery Philippines, Inc (WAP, Inc.)

136 P. Dela Cruz St., San Bartolome, Novaliches, 1123, Quezon City Tel. No.: +632.881.9605 Cell No.: +63905.353.0058 Email Add.: rcsombriosecgen@gmail.com

REF. NO.: 2017-07

#### MEMORANDUM

### TO : All World Archery Philippines Members and Club Members

- DATE : February 8, 2017
- SUBJECT : Youth Olympics Trial 2 (February 24 26, 2017)

VENUE : Camp Lapu-Lapu, Parade Ground, Lahug, Cebu City

#### **Guidelines for YOG Trial 2**

- The tournament is open to all active WAP members of the RECURVE CADET MEN and WOMEN CATEGORIES <u>born on or after 01 January 2001 and on or before 31 December</u> <u>2003.</u>
- 2. Accepted proof of birth record is: a clear copy of NSO birth certificate &/or passport.
- 3. Final entries and payment (please refer Invitation sent for the details)
- 4. To finalize entries, the following documents must be sent AT ONE TIME thru email to rcsombriosecgen@gmail.com:
  - a. entry form (we encourage the use of 1 entry form per team / club and please specify YOG Trial 2 in your entry form)
  - b. clear copy / scanned copy of proof of birth record
- 5. Failure to accomplish any of the above-mentioned requirements will be considered INVALID ENTRY. No on-site registration will be accepted. Payment is Non-Refundable.
- 6. Archers will shoot 72-arrow 60-meter recurve ranking round.
- 7. Only the total score of 72-arrow will be considered in the Trial 2. There will be no Olympic Round.
- 8. Schedule:

25 February 2017 - (please refer separate email for the full schedule on Feb 24 – 26, 2017)

9. MQS as follows:

RECURVE CADET MEN-630 pointsRECURVE CADET WOMEN-620 points



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10. All inquiries regarding this communication should be sent by REGISTERED CLUB COACHES ONLY and addressed to <a href="mailto:rcsombriosecgen@gmail.com">rcsombriosecgen@gmail.com</a>

11. All WA & WAP standing rules will be used to conduct the selection tournament.

Truly yours,

C

Rosendo "Dondon" Sombrio Secretary General



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ENTRY FORM

**YOUTH OLYMPICS - Trial 2** 

| Member Club :                                 |               |
|---|---------------|
| Contact Person :                              |               |
| Contact Nos. :                                |               |
| E-mail address :                              |               |
| Names of Competitors (WOMEN / GIRLS Division) | Date of Birth |
| 1   |               |
| 2   |               |
| 3   |               |
| 4   |               |
| 5   |               |
| Names of Competitors (MEN / BOYS Division)    | Date of Birth |
| 1   |               |
| 2   |               |
| 4   |               |
| 5   |               |
| Names of Coaches                              | Signature     |
| 1   |               |
| 2   |               |
|   |               |

This form can be reproduced for additional entries.

Deadline for the submission of this form is on February 18, 2017 (strictly no on-site registration) email:rcsombriosecgen@gmail.com