



4th European Deaf Feeder & Shot Cup

21 - 24th September 2022
Sevilla (Spain)



FORM REGISTRATION FORM

COUNTRY	
NUMBER OF PERSONS	
CONTACT PERSON	
E-MAIL	

TEAM	Nº	First name	Family Name	Gender ^{*1}	Date of Birth	Role ^{*2}
A	1					Athlete
	2					Athlete
	3					Athlete
	4					Athlete

B	1					Athlete
	2					Athlete
	3					Athlete
	4					Athlete

C	1					Athlete
	2					Athlete
	3					Athlete
	4					Athlete

	Nº	First name	Family Name	Gender ^{*1}	Date of Birth	Role ^{*2}
OFFICIALS	1					
	2					
	3					
	4					

^{*1} Gender: **M** (Man) or **W** (Woman)

^{*2} Role: Athlete, Coach, Assistant Coach, Leader/Director/Manager, Interpreter, Medical or Official NDSF

Please send this **FORM** to pesca@feds.es with copy of **PASSPORT + PHOTO** of each athlete/official by e-mail no later than **15th July 2022**.

We and our athletes declare that we have read the eligibility conditions for the European Deaf Feeder & Shot Cup and that we will comply with them. We agree to be filmed or photographed during the event for the purposes authorized by the FEDS.

We hereby certify that the all named athletes are DEAF, citizens of our country, and that they are registered under appropriate gender.

<u>Place and date</u>	<u>Stamp</u>	<u>President</u>



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Sevilla (Spain)



FORM

RESERVATION HOTEL + TRANSPORT + REGISTRATION FEE

COUNTRY	
NUMBER OF PERSONS	
CHECK - IN DATE	
CHECK - OUT DATE	
CONTACT PERSON	
E-MAIL	

OPTION A	250€/person/5 nights (20-25 th September 2022) Full board accommodation (Breakfast, Lunch and Dinner) Transportation (airport, hotel and venue competition) Registration Fee
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OPTION B	200€/person/3 nights (20-23 th September 2022) Full board accommodation (Breakfast, Lunch and Dinner) Transportation (airport, hotel and venue competition) Registration Fee
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OPTION C	200€/person/3 nights (22-25 th September 2022) Full board accommodation (Breakfast, Lunch and Dinner) Transportation (airport, hotel and venue competition) Registration Fee
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TYPE OF ROOM	NUMBER OF PERSONS	TOTAL
OPTION A		- €
OPTION B		- €
OPTION C		- €
TOTAL		- €

BANK	Bank Name: CaixaBank Bank Address: Avenida Jesus Rescatado, 2, 14007 - Córdoba (Spain) Swift Code: CAIXESBBXXX IBAN: ES59 2100 0890 0002 0025 1673 Beneficiary: Federacion Española de Deportes para Sordos (FEDS)
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CONDITIONS & TERMS 1. Please send this form to pesca@feds.es by e-mail no later than 15 th July 2022. 2. Deadline to payment: 100% before 31 th August 2022. 3. All charges of your bank transfers are to be paid by your federation/team. 4. Please send us the receipt of payment.
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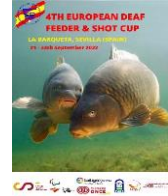
We hereby certify that the statements and information in this hotel reservation form are true and correct to the best of our knowledge.

Place and date	President	Stamp



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FORM

RESERVATION HOTEL + TRANSPORT

(ONLY FOR VISITORS. NOT ATHLETES AND OFFICIALS)

COUNTRY	
NUMBER OF PERSONS	
CHECK - IN DATE	
CHECK - OUT DATE	
CONTACT PERSON	
E-MAIL	

OPTION A	<p>300€/person/5 nights (20-25th September 2022) Full board accommodation (Breakfast, Lunch and Dinner) Transportation (airport, hotel and venue competition)</p>
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OPTION B	<p>250€/person/3 nights (20-23th September 2022) Full board accommodation (Breakfast, Lunch and Dinner) Transportation (airport, hotel and venue competition)</p>
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OPTION C	<p>250€/person/3 nights (22-25th September 2022) Full board accommodation (Breakfast, Lunch and Dinner) Transportation (airport, hotel and venue competition)</p>
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TYPE OF ROOM	NUMBER OF PERSONS	TOTAL
OPTION A		- €
OPTION B		- €
OPTION C		- €
TOTAL		- €

BANK	<p>Bank Name: CaixaBank Bank Address: Avenida Jesus Rescatado, 2, 14007 - Córdoba (Spain) Swift Code: CAIXESBBXXX IBAN: ES59 2100 0890 0002 0025 1673 Beneficiary: Federacion Española de Deportes para Sordos (FEDS)</p>
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<p>CONDITIONS & TERMS</p> <ol style="list-style-type: none"> Please send this form to pesca@feds.es by e-mail no later than 15th July 2022. Deadline to payment: 100% before 31th August 2022. All charges of your bank transfers are to be paid by your federation/team. Please send us the receipt of payment.

We hereby certify that the statements and information in this hotel reservation form are true and correct to the best of our knowledge.

Place and date	President	Stamp



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FORM

TRAVEL INFORMATION

COUNTRY	
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Please fill up this FORM "TRAVEL INFORMATION" in ensuring our pick-up and drop-off arrangement for your country.

ARRIVAL							
Nº	Airline / Train	Number flight / train	Date	Time	Origin	Destination	Number of persons
1							
2							
3							

DEPARTURE							
Nº	Airline / Train	Number flight / train	Date	Time	Origin	Destination	Number of persons
1							
2							
3							

CONTACT PERSON	
E-MAIL	
MOBILE PHONE	

Please send this form to pesca@fedes.es by e-mail no later than **31th August 2022**.

We hereby certify that the statements and information in this form "Travel information" are true and correct to the best of our knowledge.

<u>Place and date</u>	<u>Stamp</u>	<u>President</u>