

## **REGISTRATION FORM Summer Village Cup**

Club details					Team Leader				
CLUB name				Name and Surname					
VAT code			Address						
Address				Role in t	he Club				
				Г					
City Country Country				City		Country	Country		
Tel Email			Tel Email			1			
Tournament registr	ation details								
Tournament					from		to		
Category				Year of birth		n	Nr of team		
Category			Year of birth		n	Nr of team			
Category					Year of birth	n	Nr of team		
Category					Year of birth	h	Nr of team		
cutchery							W or team		
Participants		Nr.	Accommodati	ion	X	Rooms		Nr.	
Coach/Manager			4* Village (rooms	:)		Single room			
Players			5* Village (apartn	nents)		Twin room (separated beds)			
Parents/Supporters			Double room						
Infant < 3 years old			Triple room (separated beds)						
Infant < 6 years old			Triple room (1 double + 1 single bed)						
Bus Drivers			4 beds room (separated beds)						
Person with disabilities			4 beds room (1 double + 2 single beds)						
Animals			Multiple room (5 or 6 beds)						
	ants	Please check types of your tourname				Total nr. of room	ıs		
		<u> </u>						'	
Bank details									
BANK ACCOUNT HOLDER	R: <b>2erre Organizzazioni</b>	snc	(	CREDEM Cre	edito Emiliano	- VENEZIA, San Marco	4107		
IBAN CODE: IT24 T030 3				SWIFT: BACF		•			
IMPORTANT To ass	1 1	and the state of the least	dealana						
IMPORTANT: Team	_		, declares:						
I have read a	and accepted Terms and	d Conditions							
	and accepted GDPR PRIV					nament official photograp	bass		
				ne web phot	os or the tourr	iament official photograp	ners		
i attach a co	py of bank transfer of €	1.500,00 as first p	payment						
I will send th	e Rooming List, Player I	ist and final payn	nent within 30 days be	efore the tou	urnament				
		TEAM LEAI	OFR			CLUB			
DATE		SIGNATI				STAMP			