



European Deaf  
Sport Organization

Friuli Venezia Giulia

Federazione Sport  
Sordi Italia

## X<sup>th</sup> EUROPEAN DEAF HANDBALL CHAMPIONSHIP È 14 - 21 APRIL 2012 ITALY

The place where the races will take place in the European Deaf Championship in Handball 2012 is GE.TUR resort.  
in Viale Centrale, 29 Lignano Sabbiadoro (UD) Italy

**The resort GE.TUR.  
Lignano Sabbiadoro**



**Out the gym**

**Inside the gym**



**Hotel Vela**



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# PROGRAM

Saturday 14-4-2012	Sunday 15-4-2012	Monday 16-4-2012	Tuesday 17-4-2012	Wednesday 18-4-2012	Thursday 19-4-2012	Friday 20-4-2012	Saturday 21-4-2012	Sunday 22-4-2012
Arrivals	8,00/12,30 Training	8,00/12,00 Training	8,00/12,00 Training	8,00/12,00 Training	Rest	8,00/12,00 Training	10,00 Italia Ungheria	Departures
	13,30/14,30 Lunch	11,00/14,30 Lunch	11,00/14,30 Lunch	11,00/14,30 Lunch	12,30/14,30 Lunch	11,00/14,30 Lunch	11,30/14,30 Lunch	
	15,00/19,00 Training	14,00 Serbia Turchia	14,00 Italia Serbia	14,00 Serbia Germania		14,00 Ungheria Serbia	14,00 Germania Turchia	
		16,00 Germania Italia	16,00 Germania Ungheria	16,00 Turchia Ungheria		16,00 Croazia Germania	16,00 Serbia Croazia	
	Opening ceremony	18,00 Ungheria Croazia	18,00 Croazia Turchia	18,00 Italia Croazia		18,00 Italia Turchia	Closing awards ceremony	
	Dinner 21,00	Dinner 19,30	Dinner 19,30	Dinner 19,30	Dinner 19,30	Dinner 19,30	Gala Dinner 20,30	





Comitato Regionale  
Veneto F.S.S.I.

Comitato Regionale  
Friuli Venezia Giulia F.S.S.I.

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Comitato Italiano  
Paralimpico  
Friuli Venezia Giulia

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Please, send the Form to:

General Secretary  
Director of organization  
E-Mail: [col.handball@libero.it](mailto:col.handball@libero.it)  
Fax: +390415442182  
Copy: [gsportve.ens@libero.it](mailto:gsportve.ens@libero.it)

**The reservation expires : 28.02.2012**

### Accommodation Booking Newsletters

HOTEL VELA (located at the inside of the resort GE.TUR)  
Viale Centrale,29  
Lignano Sabbiadoro  
33054 Udine (Italy)  
Price of the rooms (single " 70,00, Double " 130,00, Triple " 180,00, Quadruple " 225,00)  
The price includes full board, transportation, entertainment and gala ceremony

Number rooms \_\_\_\_\_ Day of arrival \_\_\_\_\_ Day of departure \_\_\_\_\_ Total Nights \_\_\_\_\_

Total single rooms \_\_\_\_\_ x n° nights \_\_\_\_\_ x p 70,00 =

Total double rooms \_\_\_\_\_ x n° nights \_\_\_\_\_ x p 130,00 =

Total triple rooms \_\_\_\_\_ x n° nights \_\_\_\_\_ x p 180,00 =

Total quadruple rooms \_\_\_\_\_ x n° nights \_\_\_\_\_ x p 225,00 =

Total amount \_\_\_\_\_ p

Federation \_\_\_\_\_ country \_\_\_\_\_

Address \_\_\_\_\_ post code \_\_\_\_\_

Contact \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

### Bank account international

IBAN: IT94 G085 3264 6300 0000 0710 578

BIC: ICRAITRES0

BCC CREDIT COOPERATIVE ó Via S.Lorenzo, 78 ó 34077 Ronchi dei Legionari (GO) ITALY

Once completed the form, make the bank transfer within 5 days.

Please send a copy of the bank transfer by fax e e-mail.



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### FLIGHT DATA FORM

NATION PARTECIPANT: \_\_\_\_\_

NUMBER OF PEOPLE: \_\_\_\_\_

BY WHAT MEANS OF TRANSPORT YOU FROM?  Flight  Train

Arrival date: \_\_\_\_\_

Time: \_\_\_\_\_

Place: \_\_\_\_\_

Departure date: \_\_\_\_\_

Time: \_\_\_\_\_

Place: \_\_\_\_\_

**DEADLINE: 28.02.2012**

Date \_\_\_\_\_

Stamp

President \_\_\_\_\_