EUROPEAN DEAF SPORT ORGANIZATION

Application to host
European Deaf Championship

Our Association would like to host a European Deaf Championship.

FULL NAME OF BIDDER:

_____

WHat SPORT? _____

WHICH CITY? _____

WHEN? _____/ ____/ _____to _____/ ____/ ___

Day Month Year Day Month Year

We have attached:

- ☐ A certificate of support from the city proposed
- ☐ A certificate of support from the National Deaf Sport Federation in question
- ☐ Current price list for hotels, meals and transport

We, as an European Deaf Sport Organization for the Deaf member, agree to abide by the " European Deaf Championships – Regulations" in force.

Date:_____ _____ _____

President (Signature) Secretary-General (Signature)

Form send to Vice President Bjørn Røine
Sømveien 6A
0493 Oslo
Norway
Or E-mal : broine@online.no

10th June at the latest