**ITALIAN MARTIAL ARTS GATHERING**

**MONTESILVANO – 16-18 SEPTEMBER 2022**

**IBAN REFERENCE ACSI: IBAN: IT 50 S 03069 09606 1000 0007 6397  
REASON: MARTIAL ARTS INTERNSHIP [SURNAME / SCHOOL] OVERNIGHT STAY**

|  |  |
| --- | --- |
| **SCHOOL** |  |
| **COUNTRY** |  |
| **MASTER** |  |
| **PHONE NUMBER** |  |
| **E-MAIL ADDRESS** |  |
| **DISCIPLINE OF MARTIAL ARTS** |  |

**PARTECIPANTI**

|  |  |  |
| --- | --- | --- |
| **NAME AND SURNAME** | **ATHLETE OR TECHNICIAN** | **DISCIPLINE OF**  **MARTIAL ARTS** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**HOTEL RESERVATION**

|  |  |
| --- | --- |
| NUMBER OF GROUP COMPONENTS |  |

**TYPE OF HOTEL IN AGREEMENT (MARK WITH AN X)**

|  |  |
| --- | --- |
| **3 STARS - FULL BOARD** |  |
| **4 STARS - FULL BOARD** |  |

**NUMBER OF ROOMS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **THURSDAY 15** | **FRIDAY 16** | **SATURDAY 17** | **SUNDAY 18** |
| **SINGLE ROOM** |  |  |  |  |
| **DOUBLE ROOM** |  |  |  |  |
| **TRIPLE ROOM** |  |  |  |  |
| **ROOM FOR FOUR PEOPLE** |  |  |  |  |

**ACCOMMODATION IN THE ROOMS**

REDUCTION FOR CHILDREN: IF ACCOMMODATED IN THIRD OR FOURTH BED, SPECIFY AGE.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **TYPE OF ROOM (DOUBLE, TRIPLE, ...)** | **THURSDAY [X]** | **FRIDAY**  **[X]** | **SATURDAY**  **[X]** | **SUNDAY [X]** | **NAMES AND SURNAMES GUESTS IN THE ROOM** | **REDUCTION FOR CHILDREN** |
|  |  |  |  |  | NAME AND SURNAME  NAME AND SURNAME |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |