



**2<sup>nd</sup> EUROPEAN CLUB TEAMS CUP**  
MADRID - Spain  
9<sup>th</sup> - 11<sup>th</sup> October 2009



*May, 11<sup>th</sup> 2009*

TO ALL EMAU MEMBER ASSOCIATIONS

Dear President,

As President of the Organizing Committee of 2<sup>nd</sup> European Club Teams Cup, I have especial pleasure to invite your association clubs to participate. This event will be organized following the EMAU Teams Club Cup rules for 2009 in the recurve division.

You will experience warm Madrid hospitality and we hope your Clubs will enjoy their stay in our country.

Please find enclosed the necessary documents concerning the registration, organization and participation in this event. We kindly ask you to respond within the stated deadlines:

- Invitation Letter
- Preliminary Program
- Notes
- Preliminary Entry Form 07/08/2009
- Hotel Booking Form 05/09/2009
- Budget Form 05/09/2009
- Final Entry Form 17/09/2009
- Transport Form 01/10/2009

Looking forward to seeing you and your Clubs in Madrid.

Sincerely yours,

Lorenzo Miret Alfonso  
President of the Royal Spanish Archery Federation  
President of the O.C.





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## **PRELIMINARY PROGRAM**

### **Friday**

**October 9th**

Arrival of participants / *Llegada de participantes*  
Practice / *Entrenamiento*  
Opening Ceremony / *Ceremonia de Apertura*

### **Saturday**

**October 10th**

10:00 Qualification Round Men 2 x 70m  
*Serie de Calificación Caballeros 2 x 70m*

14:00 Qualification Round Women 2 x 70m  
*Serie de Calificación Damas 2 x 70m*

### **Sunday**

**October 11th**

08:30 Team matches / *Encuentros de equipos*  
13:00 Award Ceremony

#### NOTE:

This preliminary program could be slightly changed. All changes will be published and distributed to all participants in due time.





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## **NOTES**

The EMAU Member Association takes care of its Federation's clubteams.

Please, remember to join a letter from your federation confirming both, that your Club is selected to compete, and that the clubteam-athletes are members of the participating club as per the **1<sup>st</sup> January 2009** when you send the **entry form**.

In any case, before being allowed to participate in the European Clubteams Cup, the Member Association must confirm that the clubteams-athletes are members of the participating club as per the 1<sup>st</sup> January of 2009.

Maximum number of clubteams per country: 5 men clubteams and 5 women clubteams.

Each clubteam is composed by 3 archers. Mixed teams are not accepted.

Maximum number of teams by Club: 1 per class

Please refer to the Accommodation pages below for detailed hotel information. Ensure that you complete all the necessary forms by the specified dates and make full payment for accommodation at the time of booking (or in cash in Euros upon arrival). No travel checks will be accepted.

For Participants who will decide to book their accommodation in other hotels (no-official hotel) the OC is not responsible for providing transportation from this hotel to the venue (transport for these persons will be provided just from the official hotels). In addition, no information will be distributed to the no-official hotels.





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**MADRID - Spain**  
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**PRELIMINARY ENTRY FORM**

Return at latest: **August the 7<sup>th</sup> 2009**

Return to: **FAX: (+34) 954 222 479 E-MAIL: [sevilladeportes3@viajeseci.es](mailto:sevilladeportes3@viajeseci.es)**

**SPORT EVENTS DIVISION // VIAJES EL CORTE INGLÉS S.A.**

**For the attention of: Ms.Susana Fashho**

C/ Teniente Borges nº 5 - 41002 SEVILLA

TELEPHONE: (+34) 954 506 604

**NAME OF MEMBER ASSOCIATION:** \_\_\_\_\_

Name of the Club: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Fax: \_\_\_\_\_ Tel: \_\_\_\_\_

E-mail address: \_\_\_\_\_

NUMBER OF COMPETITORS AND OFFICIALS

Men: \_\_\_\_\_ Women: \_\_\_\_\_ Officials & accompanying persons: \_\_\_\_\_

Name of the Club: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Fax: \_\_\_\_\_ Tel: \_\_\_\_\_

E-mail address: \_\_\_\_\_

NUMBER OF COMPETITORS AND OFFICIALS

Men: \_\_\_\_\_ Women: \_\_\_\_\_ Officials & accompanying persons: \_\_\_\_\_

Name of the Club: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Fax: \_\_\_\_\_ Tel: \_\_\_\_\_

E-mail address: \_\_\_\_\_

NUMBER OF COMPETITORS AND OFFICIALS

Men: \_\_\_\_\_ Women: \_\_\_\_\_ Officials & accompanying persons: \_\_\_\_\_

I hereby declare that our Member Association is in good standing and that for all competitors and officials are covered in case of illness or accident and have signed the FITA Anti-Doping Agreement.

Date: \_\_\_\_\_ Signature \_\_\_\_\_

President/Secretary





## 2<sup>nd</sup> EUROPEAN CLUB TEAMS CUP

MADRID - Spain  
9<sup>th</sup> - 11<sup>th</sup> October 2009



# HOTEL BOOKING FORM

Return at latest: **September the 5<sup>th</sup> 2009**

Return to: **FAX: (+34) 954.22.24.79 E-MAIL: [sevilladeportes3@viajeseci.es](mailto:sevilladeportes3@viajeseci.es)**

**SPORT EVENTS DIVISION // VIAJES EL CORTE INGLÉS S.A.**

**For the attention of: Susana Fashho VIAJES EL**

CORTE INGLES - CENTRAL COMERCIAL

C/ Teniente Borges nº 5 - 41002 SEVILLA

TELEPHONE: (+34) 954 506 604

### NAME OF MEMBER ASSOCIATION: \_\_\_\_\_

Name of the Club: \_\_\_\_\_

	HOTEL	BED & BREAKFAST			HALF BOARD			FULL BOARD		
		SINGLE ROOM	DOUBLE ROOM	TRIPLE ROOM	SINGLE ROOM	DOUBLE ROOM	TRIPLE ROOM	SINGLE ROOM	DOUBLE ROOM	TRIPLE ROOM
1	HUSA MONCLOA (****)	75,75 €	134,50 €	69,16 €	109,25 €	168,00 €	102,70 €	143,00 €	182,00 €	136,40 €
2	SUITES VIENA (***)	53,50 €	102,00 €	48,16 €	70,50 €	118,50 €	65,00 €	87,50 €	135,50 €	81,85 €
3	PRINCIPE PIO (***)	50,50 €	92,50 €	47,00 €	64,75 €	107,00 €	64,84 €	78,00 €	120,00 €	78,00 €
4	FLORIDA NORTE (****)	42,75 €	68,50 €	38,10 €	58,25 €	84,00 €	58,70 €	74,00 €	100,00 €	75,00 €
5	HESPERIA GETAFE (****)	39,00 €	78,07 €	39,00 €	49,00 €	78,07 €	49,00 €	60,00 €	108,00 €	56,70 €
6	AC GETAFE (****)	39,00 €	78,07 €	39,00 €	49,00 €	78,07 €	49,00 €	60,00 €	108,00 €	56,70 €
7	NH LEGANES (***)	39,00 €	78,07 €	39,00 €	49,00 €	78,07 €	49,00 €	60,00 €	108,00 €	56,70 €

1. Price per person/night. Taxes included.
2. Half Board: breakfast and dinner.
3. After August the 10<sup>th</sup>, reservations will depend on the availability of the hotels.

Chosen hotel number				
Hotel name				
	Room price	Number of persons	Number of nights	Total hotel
	<b>A</b>	<b>B</b>	<b>C</b>	<b>A x B x C</b>
Single room				0,00
Double room				0,00
Triple room				0,00
<b>Total to be paid for accommodations</b>			<b>Total 1</b>	0,00

PLEASE INDICATE ANY SPECIAL ACCOMODATIONS OR MEAL NEEDS

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
President or Secretary





## 2<sup>nd</sup> EUROPEAN CLUB TEAMS CUP

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9<sup>th</sup> - 11<sup>th</sup> October 2009

### BUDGET FORM



Return at latest: **September the 5<sup>th</sup> 2009**

Return to: **FAX: (+34) 954 222 479** **E-MAIL: [sevilladeportes3@viajeseci.es](mailto:sevilladeportes3@viajeseci.es)**,

**SPORT EVENTS DIVISION // VIAJES EL CORTE INGLÉS S.A.** For the attention of: **Ms. Susana Fashho**

VIAJES EL CORTE INGLES - CENTRAL COMERCIAL C/ Teniente Borges nº 5 - 41002 SEVILLA

TELEPHONE: (+34) 954.506.604

**NAME OF MEMBER ASSOCIATION:** \_\_\_\_\_

Name of the Club: \_\_\_\_\_

Type of fee	Fee	Number of persons	Total entry fee
	A	B	A x B
Team entry fee	<b>150,00 €</b>		<b>0,00 €</b>
Lunch on the field on Friday 9 <sup>th</sup> (*)	<b>5,00 €</b>		<b>0,00 €</b>
Lunch on the field the 10 <sup>th</sup> and 11 <sup>th</sup> (*)	<b>8,00 €</b>		<b>0,00 €</b>
Archers & Officials Airport transport	<b>20,00 €</b>		<b>0,00 €</b>
<b>Total to be paid for competition</b>		<b>Total 2</b>	<b>0,00 €</b>
Total to be paid for accommodations (see hotel form)		<b>Total 1</b>	<b>0,00 €</b>
<b>TOTAL COST OF THE CHAMPIONSHIP</b>		<b>TOTAL 1+2</b>	<b>0,00 €</b>

**Registration fees include:** daily local transportation to and from the hotel and the competition site, water supply during the competition and participation.

### **PAYMENT CONDITIONS**

#### **DEPOSIT AND CANCELLATION POLICIES**

##### **DEPOSIT POLICY**

- 60% of total reservation before September the 5<sup>th</sup> 2009 to confirm the reservation
- 40% remaining amount before September the 26<sup>st</sup> 2009

##### **CANCELLATION POLICY**

- From September the 5<sup>th</sup> to September the 25<sup>th</sup>: 80% of reservation cancellation costs
- From September the 26<sup>th</sup>: cancelled reservations will not be refundable

#### **FORM OF PAYMENT AND CONFIRMATION**

##### **1. CREDIT CARD**

**Charge to my card:** VISA \* MASTER CARD \* OTHERS: \_\_\_\_\_

CARD NUMBER \_\_\_\_\_ E \_\_\_\_\_ / \_\_\_\_\_

C \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

Control digits on back of card<sup>1</sup> \_\_\_\_\_

##### **2. BANK TRANSFER**

VIAJES EL CORTE INGLÉS, S.A

BANCO BILBAO VIZCAYA ARGENTARIA

SWIFT BBVAESMMXXX

**I.B.A.N: ES97 0182 3999 3702 0066 4662**

THE COPY OF THE BANK TRANSFER MUST BE SENT BY FAX TO:

VIAJES EL CORTE INGLÉS S.A.

FAX: (+34) 954.22.24.79

(\*) Due to organisational issues, club teams wishing to have lunch on the field during the competition **must** make their reservation through this form within the due deadline. Reservations received after the deadline or not included in this form will not be considered.

<sup>1</sup> The personal details included in this document are of a confidential nature. In accordance with the Organic Law 15/1999, of 13 December, the holder of this data will be able to exercise his or her right of access, change and cancellation upon written request to "Viajes El Corte Ingles, S.A."





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## FINAL ENTRY FORM

Return at latest: **September 17<sup>nd</sup> 2009**

Return to: **FAX: (+34) 954 222 479 EMAIL: [sevilladeportes3@viajeseci.es](mailto:sevilladeportes3@viajeseci.es)**

**SPORT EVENTS DIVISION // VIAJES EL CORTE INGLÉS S.A. For the attention of: Ms.Susana Fashho**

VIAJES EL CORTE INGLES - CENTRAL COMERCIAL C/ Teniente Borges nº 5 - 41002 SEVILLA

TELEPHONE: (+34) 954 506 604

**NAME OF MEMBER ASSOCIATION:** \_\_\_\_\_

Name of the Club: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Fax: \_\_\_\_\_ Tel: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Women** (Last name/First name)

**Men** (Last name/First name)

1. \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

3. \_\_\_\_\_

Official \_\_\_\_\_

Official \_\_\_\_\_

Official \_\_\_\_\_

Official \_\_\_\_\_

Name of the Club: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Fax: \_\_\_\_\_ Tel: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Women** (Last name/First name)

**Men** (Last name/First name)

1. \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

3. \_\_\_\_\_

Official \_\_\_\_\_

Official \_\_\_\_\_

Official \_\_\_\_\_

Official \_\_\_\_\_





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**NAME OF MEMBER ASSOCIATION:** \_\_\_\_\_

Name of the Club: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Fax: \_\_\_\_\_ Tel: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Women** (Last name/First name)

**Men** (Last name/First name)

- |          |          |
|----------|----------|
| 1. _____ | 1. _____ |
| 2. _____ | 2. _____ |
| 3. _____ | 3. _____ |

Official \_\_\_\_\_ Official \_\_\_\_\_

Official \_\_\_\_\_ Official \_\_\_\_\_

Name of the Club: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Fax: \_\_\_\_\_ Tel: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Women** (Last name/First name)

**Men** (Last name/First name)

- |          |          |
|----------|----------|
| 1. _____ | 1. _____ |
| 2. _____ | 2. _____ |
| 3. _____ | 3. _____ |

Official \_\_\_\_\_ Official \_\_\_\_\_

Official \_\_\_\_\_ Official \_\_\_\_\_

**Please: block letters**

I hereby declare that our Member Association is in good standing and that all competitors and that all participants expenses are covered, including in case of illness or accident and have signed the FITA Anti-doping Agreement.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 President or Secretary







**2<sup>nd</sup> EUROPEAN CLUB TEAMS CUP**  
**MADRID - Spain**  
**9<sup>th</sup> - 11<sup>th</sup> October 2009**



**TRANSPORT FORM**

Return at latest: **1<sup>st</sup> October 2009**

Return to: **FAX: (+34) 954 222 479 E-MAIL: [sevilladeportes3@viajeseci.es](mailto:sevilladeportes3@viajeseci.es)**

**SPORT EVENTS DIVISION // VIAJES EL CORTE INGLÉS S.A.**

**For the attention of: Ms.Susana Fashho**

VIAJES EL CORTE INGLES - CENTRAL COMERCIAL

C/ Teniente Borges nº 5 - 41002 SEVILLA

TELEPHONE: (+34) 954 506 604

**NAME OF MEMBER ASSOCIATION:** \_\_\_\_\_

Name of the Club: \_\_\_\_\_

Total number of Archers:

Total number of officials:

*Means of transportation (please tick the appropriate box)*

**ARRIVAL**

<input type="checkbox"/>		Airport: _____
		Flight nº: _____ From _____
		Date: ____/____/____ Time: ____ h ____ min
<input type="checkbox"/>		Station: _____
		From: _____
		Date: ____/____/____ Time: ____ h ____ min
<input type="checkbox"/>		Date: ____/____/____ Time: ____ h ____ min

**DEPARTURE**

<input type="checkbox"/>		Airport: _____
		Flight nº: _____ To: _____
		Date: ____/____/____ Time: ____ h ____ min
<input type="checkbox"/>		Station: _____
		To: _____
		Date: ____/____/____ Time: ____ h ____ min
<input type="checkbox"/>		Date: ____/____/____ Time: ____ h ____ min

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

President/Secretary

