



FENCING SUMMER CAMP 2024 – APPLICATION FORM
VILLAGGIO OLIMPICO BARDONECCHIA

DATA OF THE CAMP PARTICIPANT:

Applier's name _____

member of the Fencing Club _____

born in _____ on ____ - ____ - ____ Federal ID card _____

city _____ code _____ address _____ n. _____

Indicate the fencing category for the season 2024-2025 _____

REQUIRED CONTACTS FOR SENDING CAMP-RELATED COMMUNICATIONS

mail _____ mobile _____ connected to WhatsApp

IF THE CAMP PARTICIPANT IS A MINOR, PLEASE FILL IN THE PART BELOW AS A PARENT / LEGAL TUTOR:

Parent's/Tutor's name _____ born in _____

on ____ - ____ - ____ address _____ n. _____ city _____ code _____

Parent/Legal tutor of the minor _____

REQUIRED CONTACTS FOR SENDING CAMP-RELATED COMMUNICATIONS

mail _____ mobile _____ connected to WhatsApp

APPLIES FOR

the registration to the Fencing Camp that will be held in Bardonecchia in the period:

1° shift from 18 August to 24 August 2024 (cat. CADET - JUNIOR - SENIOR)

2° shift from 25 August to 31 August 2024 (cat. UNDER 14 - UNDER 10)

See points 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12 and 13 of the **"Participation Fees and General Regulations"** and the **"Information on travel and accommodation"** for the Fencing Camp provided below must be read and signed for approval.

THE FOLLOWING DOCUMENTS HAVE TO BE ENCLOSED

- copy of the BANK TRANSFER for payment of the fee DEPOSIT BALANCE
- copy of the European Health Insurance Card (if available) of the participant
- copy of the medical certificate of competitive suitability for the practice of fencing expiring on _____
- signed copy of ANNEX 1 - DISCLAIMER OF EXEMPTION FROM LIABILITY
- signed copy of ANNEX 2 - PERMISSION AND RELEASE FORM FOR IMAGES
- signed copy of ANNEX 3 - AUTHORIZATION FOR AUTONOMOUS EXIT OF THE MINOR
- signed copy of ANNEX 4 - AUTHORIZATION OF ACCOMPANIMENT FOR MINORS
- any medical certificate proving food or drug allergies

You authorize the processing of and communication and release of personal data (art. 13 of Regulation (EU) 2016/679 defined GDPR.)

Date _____

Signature _____



PARTICIPATION FEES AND GENERAL REGULATIONS

- 1) The participation fee is **€ 620,00** including insurance (10% reduction for siblings). The fee only includes:
 - Full board with drinks at main meals
 - Sports activities for whole stay
- 2) The accommodation will be in four/triple-bed rooms. It is possible to change the accommodation by paying the supplements:
 - Accommodation in DOUBLE room : supplement 10 € per day per person
 - Accommodation in SINGLE room : supplement 20 € per day per person
- 3) Registration is required before **12 JULY 2024**.
The registration deposit of **€ 350,00** must be paid at the time of registration., to settle by bank transfer to the account of Accademia Scherma Marchesa, as a deposit.
The balance of the Camp fee of **€ 270,00** is due before **12 JULY 2024** by bank transfer to the account of Accademia Scherma Marchesa
- 4) Following discounts and grants are available:
 - **number 2 FREE** registrations for individual medalists at 2024 World and European Championships, from any country they are from
 - **number 3 reductions at 50%** for the first 3 athletes of the Italian Cadet and Youth ranking.
 - **number 5 reductions at 30%** for the first 10 athletes of the Italian Cadet and Youth ranking, and among the first 20 athletes of the Absolute Italian ranking.

The use of the promotion is subject to the date of registration and to the payment of the balance
- 5) Copy of the transfer is to be sent to the Secretary of the Accademia Scherma Marchesa.
- 6) The deposit of € 350,00 is not refundable, unless the Camp does not take place.
- 7) No refund is due in the 7 days before the start of the Camp or during the Camp.
- 8) The Organizing Company declines all responsibility for any accidents or injuries to people or damages that may occur before, during and after the Camp.
- 9) Participants in the Camp must carefully observe the instructions given by the attending coaches.
- 10) The Camp will be activated with a minimum presence of 40 athletes per shift.
- 11) In case of cancellation of the event by the organizers, the entire fee paid will be refunded.
- 12) A negative antigenic swab taken within 48 hours prior to the start of the Camp may be required at the expense of the participants.

13) Camp participants are responsible for any damage caused to the facilities

BANK TRANSFER DETAILS FOR DEPOSIT/ BALANCE OF THE CAMP FEE

IN FAVOUR OF:

C/C N°**000000084070** PAYABLE TO: "**Accademia Scherma Marchesa**"
ABI **03048** - CAB **30570** - IBAN **IT07 0030 4830 5700 0000 0084 070**
AT:
BANCA DEL PIEMONTE
Agenzia di Leinì (Torino)

TRANSFER REASON (FULL NAME of participant) DEPOSIT/BALANCE SUMMER CAMP FEE 2024 from _____ to _____



INFORMATION FOR TRAVEL AND ACCOMMODATION

ARRIVALS AND DEPARTURES

Check-in is from 2:00 pm to 4:00 pm on Sunday, August 18, 2024 or Sunday, August 25, 2024 at the Olympic Village in Bardonecchia (Torino).

Check-out is from 2:00 pm to 4:00 pm on Saturday, August 24, 2024 or Saturday, August 31, 2024 at the Olympic Village in Bardonecchia (Torino).

COACHES

The technical and organizing management is carried out by a team of qualified Fencing Coaches and Trainers.

ACTIVITIES

The daily sport and recreational activities of the athletes will be organized by the technical managers.

Extra activities (requiring extra costs) might be organized, such as:

- Swimming in the Olympic Village pool
- A ride on the "Alpine Coaster"
- Visit to the museum in the Fort of Bramafan, with a short hike

INFORMATION

Accademia Scherma Marchesa - Tel.: +39 011.200750

- mail: marchesa@scherma.torino.it - Facebook: **Fencing Summer Camp Epeexperience**

- Secretary: Ms. Silvia - mobile +39 331.7229057
- Managing Coach: Mr. Andrea Pelisetti +39 347.6612849

CONTACTS DURING THE CAMP:

Parents or athletes participating to the Camp can refer to:

- Mr. Andrea Pelisetti – Coach at the Accademia Scherma Marchesa – mobile: +39 347.6612849
- Bardonecchia Olympic Village – www.villaggiobardonecchia.it

FOR YOUR LUGGAGE:

Fencing:

- complete equipment according to FIE regulations is required, with "working" weapons.

For the sports activities:

- | | |
|--------------------------|---|
| - tracksuit | - short pants |
| - cotton t-shirts | - shoes and socks suitable for short excursions |
| - bathrobe or bath towel | - bathing suit and slippers for the pool |
| - sweater or sweatshirt | - anorak |
-



ANNEX 1

DISCLAIMER OF EXEMPTION FROM LIABILITY

FENCING SUMMER CAMP 2024 Villaggio Olimpico Bardonecchia

DATA OF THE CAMP PARTICIPANT:

Applier's name _____

born in _____ on ____ - ____ - ____ Federal ID card _____

resident in _____ address _____ n. _____

IF THE CAMP PARTICIPANT IS A MINOR, PLEASE FILL IN THE PART BELOW AS A PARENT / LEGAL TUTOR:

Parent's/Tutor's name _____ born in _____

on ____ - ____ - ____ resident in _____ address _____ n. _____

Italian Fiscal code (if any) _____

Parent/Legal tutor of the minor _____

REGISTERED AT THE FENCING CAMP

1st SHIFT from 18 August to 24 August (Cat. CADET-JUNIOR-SENIOR)

2 nd SHIFT from 25 August to 31 August (Cat. UNDER 14 - UNDER 10)

DECLARES

disclaims the Accademia Scherma Marchesa A.S.D and the F.I.S. (Italian Fencing Federation) from any responsibility related to the behavior of the minor participant during the stay, as well as any obligations of the accompanying persons in charge (art. 2048 C.C.)

Signature

Date _____



ANNEX 2

PERMISSION TO PUBLISH IMAGES

DATA OF THE CAMP PARTICIPANT:

Applier's name _____

born in _____ on ____ - ____ - ____ Federal ID card _____

resident in _____ address _____ n. _____

Italian Fiscal code (if any) _____

IF THE CAMP PARTICIPANT IS A MINOR, PLEASE FILL IN THE PART BELOW AS A PARENT / LEGAL TUTOR:

Parent's/Tutor's name _____ born in _____

on ____ - ____ - ____ resident in _____ address _____ n. _____

Italian Fiscal code (if any) _____

Parent/Legal tutor of the minor _____

- agrees to authorize Accademia Scherma Marchesa to publish photographs and videos of the above mentioned participant to the Camp within the fencing activities related to competitions, sport events, including promotional activities.
- accepts the registration in the web site www.scherma.torino.it and the possibility that the name of the minor will be advertised via web and appear in the pages of the browser or disclosed to newspapers/televisions and press if it is in the interest of Accademia Scherma Marchesa in terms of sport information
- accepts that the personal data related to the above-mentioned minor will be treated on paper and/or digital supports.
- authorizes the publication of personal data according to the privacy laws.
- Authorizes any change of the images provided that will not affect his/her personal dignity and decorum.
- I relieve the Responsibles of Accademia Scherma Marchesa from any financial responsibility and from any liability relating to misuse of personal data and photos provided by third parties.
- I confirm that the Responsibles of Accademia Scherma Marchesa are released from any direct or indirect liability relating to damage to my property or the image of my protected, to have nothing to claim because of what mentioned above and irrevocably waive any right, action or claim arising from what is authorized above.

Date: ____ / ____ / _____

_____ (signature of the participant)

_____ (signature of the parent/legal tutor of the minor)



ANNEX 3

AUTHORIZATION FOR MINORS TO LEAVE THE CAMP

Parent's/Tutor's name _____ born in _____

on ____ - ____ - ____ resident in _____ address _____ n. ____

Italian Fiscal code (if any) _____

Parent/Legal tutor of the minor _____

DECLARES

- to be aware that, outside training hours, Accademia Scherma Marchesa is not responsible for the minor;
- the absence of the parents or any other adult at the exit of the camp;
- to accept the characteristics of the facilities
- to be responsible for his/her child's behaviour

AUTHORIZES

His/her child to leave the Olympic Village of Bardonecchia at the end of the "Fencing Summer Camp Epeexperience" on (date) _____, without being accompanied by an adult.

The Camp Staff, Accademia Scherma Marchesa A.S.D., the coaches and managers of the company are not responsible for any accidents or casualties that may occur to the minor participant after leaving the facility.

Place and date

Parent/tutor signature



ANNEX 4

AUTHORIZATION OF ACCOMPANIMENT FOR MINORS

Parent's/Tutor's name _____
born in _____ country (____), on _____
resident in _____ country (____)
full address _____
identity card id _____ issued by _____
telephone number _____
as the parent/tutor of the minor (Full Name) _____
born in _____ country (____), on _____

AUTHORIZES

Mr./Mrs./ _____
born in _____ country (____), on _____
resident in _____ country/prov (____)
full address _____
identity card id _____ issued by _____
to accompany the above-mentioned minor during the return trip from the "Fencing Summer Camp Epeexperience - Bardonecchia 2024 on (date) _____ .

Please attach:

- **Copy of the parent/tutor identity card;**
- **Copy of the identity card of the authorized person**

Signature of the delegating person
