

INTERNATIONAL TEACHERS SUMMER CAMP 2019

APPLICATION FORM (Fill in and deliver)

SURNAME	NAME	

Mark the required option

Option A)

 included: summer camp activity, full board excluded: travelling expenses and extra consummations

Option B)

□ Summer camp activity, lunch, dinner

I declare:

 \Box to be able to carry out the activity of the Karate in compliance with the health regulations in force, relieving the organizers, teachers, and any instructor of I.K.T.A International Karate Teachers Academy from any direct and / or indirect responsibility and consequences that could derive;

 \Box to be aware of the regulations in force and relative to civil liability and at the same time exonerate I.K.T.A. International Karate Teachers Academy and each person responsible for any responsibility for injuries and / or damages suffered and / or caused by the undersigned to things and / or persons during the duration of the "TEACHER SUMMER CAMP 2019" activity, due to non-compliance of the indications contained in the program and / or established by the managers.

Sincerely (legible signature)

Budo Pass I.K.T.A. n.

 Signing up date_____

 confirmed registration date_____

 cut ______

SURNAME____

_____NAME_____

The coupon must be detached at the time of registration. it must be presented to confirm the
registration
Signing up date

confirmed registration date_____

- □ Option A) included: summer camp activity, full board (excluded: travelling expenses, extra consummations)
- □ Option b) Summer camp activity, lunch, dinner

Registration by 17th MARCH 2019

Logistic information:

□ Wednesday 24/07/2019, at h.5:00 p.m. arrival and check-in at "HOTEL SASSO" a Bovolone (VR) – via San Pierino 318 – 37051 Bovolone ITALY

 \Box Sunday 28/07/2019 at h 3:00 p.m. departure

Info: segreteria@ikta.it | Emilio 3284841354

Note: the payment receipt will be delivered on the day of the event