……………………………………………………………………………………………………………………………………..……………………………….

PRELIMINARY HOTEL RESERVATION FORM

Club team and Member Association:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact person:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Number of Rooms:

**Hotel Catez/\*\*\* Hotel Toplice/\*\*\*\***

Single € 120 Single € 140

Double: € 90 Double: € 100

Do you require a room for a disabled team member? Yes No

If yes, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do any of your team members have dietary requirements or allergies such as, vegetarian,   
nut allergies or gluten free etc. Yes No

If yes, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Accommodation Payment:

**ROOM TYPE AMOUNT OF ROOMS NIGHT RATE P/N TOTAL RATE**

\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Single \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_x \_\_\_\_\_\_\_\_\_\_\_ x = \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Double/Twin \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ x \_\_\_\_\_\_\_\_\_\_\_ x = \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL ACCOMMODATION AM**OUNT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DEPOSIT 60% OF TOTAL AMOUNT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

PLEASE RETURN THIS PRELIMINARY HOTEL RESERVATION FORM TO THE ORGANIZERS AND PAY THE DEPOSIT BEFORE **1 August 2019** by e-mail to [oc-catez@archery-si.org](mailto:oc-catez@archery-si.org)

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of President / Secretary General: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.............................................................................................................................................................................

TRANSPORTATION FORM

Club team and Member Association:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of passengers:      \_\_\_\_\_\_\_\_ person/s

Arrival information

We will arrive by plane:

Airport:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Flight Nr:      \_\_\_\_\_\_\_\_\_\_\_\_\_

Date:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Arrival Time:      \_\_\_\_\_\_\_\_\_\_\_

We will arrive to CATEZ by:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Departure information

We will depart by plane:

Airport:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Flight Nr:      \_\_\_\_\_\_\_\_\_\_\_\_\_

Date:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Departure Time:      \_\_\_\_\_\_\_\_\_\_\_

We will depart from CATEZ by:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:      \_\_\_\_\_\_\_\_\_

Signature of President / Secretary General: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLEASE RETURN THIS TRANSPORTATION FORM TO THE ORGANIZER BEFORE   
**1 September 2019** by email to [oc-catez@archery-si.org](mailto:oc-catez@archery-si.org)

...........................................................................................................................................................................

FINAL BUDGET FORM

Club team and Member Association:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact person:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**1) Entry Fees**

Posit Cost Number of athletes Total

Club team in official hotel € 200 €      \_\_\_\_

Club team in unofficial hotel € 400 x      \_\_\_ €      \_\_\_\_

**Total 1** ................................................................................. €      \_\_\_\_

**2) Accommodation**

HOTEL TERME/TOPLICE - Full Board

Room Cost Nr of Persons Nr of nights Total

Hotel Catez/\*\*\* - Single room € 120 x      \_\_\_ x      \_\_ €      \_\_\_\_

Hotel Catez/\*\*\* - Double room € 90 x      \_\_\_ x      \_\_ €      \_\_\_\_

Hotel Toplice/\*\*\*\*- Single room € 140 x      \_\_\_ x      \_\_ €      \_\_\_\_

Hotel Toplice/\*\*\*\*- Double room € 100 x      \_\_\_ x      \_\_ €      \_\_\_\_

**Total 2** .................................................................................. €      \_\_\_\_

**3)** **Transportation**

Airport Cost Number of Persons Total

LJUBLJANA € 80 x      \_\_\_\_\_\_ €      \_\_\_\_

ZAGREB € 45 x      \_\_\_\_\_\_ €      \_\_\_\_

**Total 3** .................................................................................. €      \_\_\_\_

Date,      \_\_\_\_\_\_\_\_\_\_\_ **TOTAL /1+2+3/** €      \_\_\_\_

Signature of President / Secretary General: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLEASE RETURN THIS BUDGET FORM TO THE ORGANIZER BEFORE **1 September 2019** by e-mail to   
[oc-catez@archery-si.org](mailto:oc-catez@archery-si.org)