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FEDERAZIONE ITALIANA SPORT INVERNALI



# OPA CONTINENTAL CUP - OPA GAMES

## CROSS COUNTRY

### SCHILPARIO, 24/25 FEBRUARY 2024

**Formulario richiesta di alloggio – Buchungsformular - Booking form**  
(Riempire ed inviare - Ausfüllen und abschicken - Entry by numbers:  
**termine/termin/until 15.11/2023 - Mail: [info@sciclubschilpario.it](mailto:info@sciclubschilpario.it)**)

**NATIONALER VERBAND / NATIONAL ASSOCIATION / NAZIONE:** \_\_\_\_\_

	Frauen/Ladies/Femm	Männer/Men/Maschi
Anzahl der Offiziellen		
Number of accredited officials		
Numero accompagnatori ufficiali		
Single room needed		

	Frauen/Ladies/Femm	Männer/Men/Maschi
Anzahl Athleten		
Number of competitors		
Numero Atleti		
Single room needed		

Anreisedatum / Date of arrival / Data di Arrivo	Erste Mahlzeit / First meal / Primo Pranzo	
___ / ___ / 2024	Mittagessen/Lunch/Pranzo	Abendessen/Dinner/Cena
	<input type="checkbox"/>	<input type="checkbox"/>

Abreisedatum/Date of departure/Data Partenza	Letzte Mahlzeit / Last meal / Ultimo Pranzo	
___ / ___ / 2024	Morgenessen/Breakfast/Colazione	Mittagessen/Lunch/Pranzo
	<input type="checkbox"/>	<input type="checkbox"/>

Verantwortliche Person für die Meldung Person responsible for entry Nome Responsabile	
Datum / Date / Data	
Telefon / Mobile	
Mail	
Unterschrift und Stempel Signature and Seal Firma e timbro	



COMUNE DI SCHILPARIO



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