

DISABLED BOOKING FORM

Reservation is mandatory, but does not guarantee access to the event unless confirmed in advance by Fipav by sending a confirmation email.

Data of the disabled person (applicant)

First and last name			
Born in		On	
Disability certificate			
E-mail address			

walker in a wheelchair

Details of the legal guardian (parent) of the disabled person, if any

First and last name			
Born in		On	

REQUEST

To be able to attend the European Volleyball Championships 2023 venue _____
date _____ as a spectator.

Companion:

- No entry required for any accompanying person
 Access is required for 1 accompanying person, listed below

Data of accompanying person, if any

First and last name			
Born in		On	

The payment of the ticket for the accompanying person, if any, must be made within 3 days of receipt of the credit confirmation by means of a bank transfer to IBAN, which will be shared at the time of confirmation.

At the entrance to the event you are in any case requested to present yourself with proof of disability, for possible checks.

Place and date _____ , _____

Signature _____ of _____ applicant _____ (or _____ legal representative) _____