

Application to Host Deaf Champions League U-21 FUTSAL 2019-2020-2021-2022

Our Association would like to host the edition of DEAF CHAMPIONS LEAGUE

| | | _, • | , | . • | J |
|---|----------------------|----------|-----|-----|-------|
| EDITION/YEAR: | | | | | |
| > 3 rd DCL U-21 FUTSAL 2019 | | | MEN | | WOMEN |
| > 4th DCL U-21 FUTSAL 2020 | | | MEN | | WOMEN |
| > 5th DCL U-21 FUTSAL 2021 | | | MEN | | WOMEN |
| > 6th DCL U-21 FUTSAL 2022 | | | MEN | | WOMEN |
| FULL NAME OF BIDDER: | | | _ | | |
| WHICH CITY? | | | | | |
| WHEN? / to / Day/Month Day/Mont | | | | | |
| We have attached: | | | | | |
| A certificate of support from the National Dear | Sport Federation | | | | |
| A certificate of support from the Local Council | or government | | | | |
| Video about city, stadium, pitches, press rooms, etc. (maximum 10 minutes) | | | | | |
| We, as an association, agree to abide by the regulations of Deaf Champions League in force. | | | | | |
| Date: | | | | | |
| | | | | | |
| | | | | | |
| President (Signature) Se | cretary-General (Sig | gnature) | | | |
| Form sends to Deaf Champions League | | | | | |
| E-mail: deafchampionsleague@gmail.com | | | | | |

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DEAF CHAMPIONS LEAGUE

www.deafchampionsleague.eu

Deadline: 15th June 2018 (DCL 2019), 15th June 2018 (DCL 2020), 15th June 2019 (DCL 2021) and 15th June 2020 (DCL 2022).



| | Question? | |
|----|--|-------------------------|
| 1 | How many members are in your club/association? | |
| 2 | Where is your nearest airport? | |
| 3 | Do you have a Club or Association for the Deaf? | YES[] NO[] |
| 4 | Is the host club recognised and supported by the National Deaf Sport Association/Federation? | YES[] NO[] |
| 5 | How far and how long from the airport to hotel? | () KM () min |
| 6 | How far from hotel to pitch? | () KM () min |
| 7 | Who is responsible for the pitch? Club, Council, other? | |
| 8 | Full-time for the pitch at 3/4/5 days? | YES[] NO[] |
| | | Time open: Time closed: |
| 9 | How many pitches are available? | |
| 10 | How many changing rooms available? | |
| 11 | Able to host 8-16 teams? | YES[] NO[] |
| 12 | Referees (3 max.) fully equipped for each game? | YES[] NO[] |
| 13 | Able to set up OC (Organizing Committee) with volunteers and Media? | YES[] NO[] |
| 14 | Press Room with all equipment to be provided to the DCL Committee? | YES[] NO[] |
| 15 | Press Room with WLAN / LAN to be provided to the DCL Committee? | YES[] NO[] |
| 16 | Able to co-operate with the DCL Committee fully (guidelines, introduction of the internal procedures, example: draw, rules, etc.)? | YES[] NO[] |
| 17 | With Transfer (transport bus/shuttle for Hotel-Pitch) for teams? | YES[] NO[] |
| 18 | Host club plays in League or Championship of National Deaf Sport Federation? | |
| 19 | Medical facilities? | YES[] NO[] |
| 20 | Host able to cover flights/accommodation for 3 DCL Committee members in the inspection (1 year or 6 months before to event)? | YES[] NO[] |
| 21 | Host able to cover flights/accommodation for 3 + 2 DCL Committee members (DCL Men: 3 + DCL Women: 2) in the event? | YES[] NO[] |

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