



ST.PETERSBURG FENCING FEDERATION

EPÉE DE SAINT-PETERSBOURG

MARS 10-11, 2007

COUPE DU MONDE – EPÉE FEMININE SENIORS

09 mars

réunion des arbitres, réunion des chefs.

10 mars

- 08.30 – 09.30 h - controle des licences et des armes
- 10.00 – appel
- 10.30 – scratch
- 11.00 – debut
- 15.30 – Tableau 128

11 mars

- 08.00 – Tableau de 64
- 09.15 – Tableau de 32
- 10.30 – Tableau de 16
- 12.00 – ¼ de finales
- 14.30 – la Ceremonie d'ouverture
- 18.30 – finale



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GENERAL INFORMATION

VENUE	PETERBURGSKY SCC, Gagarina pr., 8 St. Petersburg
ACCOMMODATION	PARK INN PULKOVSKAYA HOTEL **** Special rates : SGL 80 € DBL 92 € Incl. breakfast and VAT 18%
TRANSPORTATION	Airport pick-ups provided for sportsmen and officials
VISAS	Most nationalities require a visa for visiting Russian Federation. Please fill out the attached form and return it to the attention of Ms. Anna Orlova at fax # 007 812 326 55 43 or e-mail: AOrlova@spbopen.ru . You will receive a <i>Visa Support Letter</i> and the <i>Hotel Voucher</i> for applying for the visa at the Russian Consulate. Please note that you will have to apply for a <u>TOURIST VISA</u> .
CONTACTS	For all details regarding reservations, transportation, and visas please contact the Tournament Office: St. Petersburg Open Sports Management & Marketing Galernaya St., 20 St. Petersburg 190000 Russia Phone: 007 812 326 5544 Fax: 007 812 326 5543 E-mail: AOrlova@spbopen.ru



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RESERVATION REQUEST FORM

FAX: +7 812 3265543

EMAIL: aorlova@spbopen.ru

FROM: -----

Name of Person requiring room: -----

Name of Person sharing: -----

Tel: -----Fax: -----

Check in Date: -----Check-out Date: -----

Arrival Time: -----Flight # / Train #-----From-----

Men's Foil Women's Foil Women's Epee Referee Official Coach Other (specify)_____

Please return the request not later then 19 February 2007 by fax: +7 812 326 55 43.

Park Inn Pulkovskaya ****, St. Petersburg, Pobedy sq. 1 www.parkinn.com.ru		
by REZIDOR 		
SINGLE Occupancy	(Standard room)	€ 80.00
DOUBLE Occupancy	(Standard room)	€ 92.00

* Please circle required field

Room rate includes VAT 18% and Buffet Breakfast

IF YOU NEED A VISA SUPPORT, PLEASE SEND US A COPY OF YOUR PASSPORT

To hold my reservation, please send me a **Credit card Authorization Form** to the following e-mail or fax number:

E-mail\ fax:Credit Card: Visa MasterCard

Card Holder: -----Card Number: -----Expiration date: -----

RESERVATIONS CANNOT BE HELD WITHOUT FILLING IN A CREDIT CARD AUTHORIZATION FORM.

Cancellation Policy: In case of no-show or cancellations made after 19 February 2007 the Hotel will invoice the rate of 1-night accommodation to the Guest (it will be charged from the credit card of the Guest). No free cancellation can be made after 19 February 2007. Declaration: I understand that I am liable to forfeit my cancellation penalty if the indicated cancellation policy is not adhered to. The policy will be enforced and deductions will be billed on my credit card.

SIGNATURE: -----





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The following details are required for processing the visa documents.

Please return the filled out form and the copy of the passport to the attention of Anna Orlova at Fax 007 812 326 5543 or e-mail: aorlova@spbopen.ru.

Country _____

Last Name	First name(s)	Status (athlete, referee, coach, etc)	Date of Birth	Citizenship	Passport Number Date of Issue \ Date of Expiry	Place of Birth

Contact Information:

Contact Person: _____ Email: _____

Phone # _____ Fax # _____