

MEN'S WATER POLO INTERNATIONAL TOURNAMENT
Ostia 2nd – 4th December 2019

Date: 2nd - 4th December 2019
Place: City of Ostia – Roma Lido

PARTICIPATING COUNTRIES: MALTA; SERBIA; ITALY "A" ; ITALY "B"

WELCOME

It will be a pleasure for the Italian Swimming Federation and the City of Roma Lido - Ostia to welcome the above mentioned National Teams to participate in the MEN'S WATER POLO International Tournament born '99.

All arrangements will be done in order to guarantee the best atmosphere during the competition accordingly to the LEN Rules and Regulations.

HOW TO REACH ROME

The official airports is Roma Fiumicino

O.C. OFFICIAL ADDRESSE:

Italian Swimming Federation

Stadio Olimpico – Curva Nord

00194 Rome - ITALY

Telephone - + 39 06 36200406 or 457

E-mail international@federnuoto.it; pallanuoto@federnuoto.it;

LEN TECHNICAL DELEGATE

Mr. TBC

LEN REFEREES

Mr. TBC

Mr. TBC

Mr. TBC

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ACCOMMODATION

The following Hotels, selected by the OC in order to meet the teams' needs and to ensure a pleasant stay in Italy, will be used for this competition:

LEN Delegate, LEN Referees

Fly Decó Hotel ****

Lungomare Paolo Toscanelli, 52/A, 00122 Lido di Ostia
00122 – Ostia Roma Lido

TEAMS

Centro Federale FIN - Ostia

Via dei Quinqueremi 100
00122 – Ostia Roma Lido

Reservation

Italian Swimming Federation
Stadio Olimpico - Curva Nord
00194 Rome – Italy
Tel +39 06 36200406 or 457
e-mail international@federnuoto.it and pallanuoto@federnuoto.it

SWIMMING POOL:

“Centro Federale FIN” (33 x 25 m. indoor swimming pool):
Via dei Quinqueremi 100
00122 – Ostia Roma Lido

TRANSPORT

The Organising Committee will provide transfer between the official airport to the hotel and return. In order to arrange the transportation it is mandatory to fill in and send back the travel form attached within and not later than **30th October 2019.**

In addition, obviously, the local transportation will be provided.

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DELEGATION LIST, FINAL ENTRY

Country- Team			
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*Cap N°	# Surname and Name	# Age	# Passport Number

* Enter the correct Cap N° of the players presented at the Technical Meeting.
 # Enter the names and surnames 13 players complete with their Age and Passports No.

Team Officials sitting on the bench

Function	Surname and Name
HEAD COACH	
TEAM MANAGER	
ASS. COACHES	
DOCTOR	
PHYSIOTHERAPIST	

 Signature of President/Gen Sec of Fed.

 Rubber Stamp of Federation

Please return this form to Federazione Italiana Nuoto **within 25th November 2019**
international@federnuoto.it & pallanuoto@federnuoto.it

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TRAVEL FORM

Country	
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Total number of persons	
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Travel Arrangements: **Airport** **Roma** ☐

Team

Arrival Date	Time	Flight

Departure Date	Time	Flight

Others	Time	

Date

___/___/___

Signature & Stamp

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GAME SCHEDULE

Day 1
2nd December 2019

02/12/2019	19:30	ITALY "B" - SERBIA
02/12/2019	21:00	ITALY "A" - MALTA

Day 2*
3rd December 2019

03/12/2019	19:00	MALTA – ITALY "B"
03/12/2019	20:15	SERBIA – ITALY "A"

Day 3
4th December 2019

04/12/2019	18:30	MALTA – SERBIA
04/12/2019	20:00	ITALY "A" – ITALY "B"

Stadio del Nuoto of Civitavecchia (RM)
