

**LIBERTAS SCHERMA VITTORIA PORDENONE**

**1° TROFEO INTERNAZIONALE**

**DI FIORETTO E SPADA**



**CON IL CONTRIBUTO  
DELLA**



**REGIONE AUTONOMA  
FRIULI VENEZIA GIULIA**

**17-18**

**APRILE 2021**

**PALAZZETTO DELLO SPORT BELLA ITALIA EFA VILLAGE  
- VIA CENTRALE, 29 - LIGNANO SABBIAURO(UD)**



**CATEGORIE GPG  
FIORETTO - SPADA**

**PER INFO**

**[www.schermavittoria.it](http://www.schermavittoria.it)**

**oppure scrivere a [INFO@SCHERMAVITTORIA.IT](mailto:INFO@SCHERMAVITTORIA.IT)**





**SATURDAY 17 AND SUNDAY 18 April 2021**

**At the  
[Sportshall "Bella Italia EFA Village"](#)**

ASD Fencing Vittoria Pordenone with the patronage of the Municipality of Lignano Sabbiadoro, the Municipality of Pordenone, the contribution of the FVG Region, the FVG Regional Committee, the Italian Fencing Federation, organizes the First

**INTERNATIONAL FENCING COMPETITION**

**FLEURET & SWORD GPG**

Saturday 17 April 2021		
Competition start 09:30	Sword men Max n°63 athletes Year 2010 - 2009	Fleuret women Max n°35 athletes Year 2010 - 2009
Competition start 14:30	Fleuret men Max n°35 athletes Year 2010 - 2009	Sword woman Max n°63 athletes Year 2010 - 2009
Sunday 18 April 2021		
Competition start 09:30	Sword men Max n°63 athletes Year 2008 - 2007	Fleuret women Max n°35 athletes Year 2008 - 2007
Competition start 14:30	Fleuret men Max n°35 athletes Year 2008 - 2007	Sword woman Max n°63 athletes Year 2008 - 2007

**To comply with Covid safety regulations, registrations will be limited**



**LOCAL ORGANIZING COMMITTEE:** "Scherma Vittoria" Amateur Sports Association of Pordenone. Contact person: President Ornella DELNERI, cell. +39 339 2775817; Secretariat: Roberto PAOLETTI, cell. +39 347 3845419; Col: Barbara PEROTTI cell. +39 347 1033252 English language: Fabio Sambuco +39 340 8643424 Russian language: Viktorija LYAKOVA cell. +39 334 8499822 Romanian language: Mihail BANICA Tel. +39 333 118660 (E-mail: info@schermavittoria.it; Website: <http://schermavittoria.it>).

**Tournament Director** - Covid Protocol Manager: Demetrio RAFFA COVID

**Manager of LOC:** Ornella DELNERI

**LOCATION:** The competitions will be held at the Bella Italia EFA Village Sports Hall in Viale Centrale, 29 in Lignano Sabbiadoro (UD). [www.bellitaliavillage.com](http://www.bellitaliavillage.com)

<https://www.google.com/maps/dir//Bella+Italia+%26+Efa+Village,+Viale+Centrale,+29,+33054+Lignano+Sabbadoro+UD/@45.6786764,13.0899025,13z/data=!4m8!4m7!1m0!1m5!1m1!1s0x477b938f85d7cd53:0x3975d4a609648307!2m2!1d13.1249218!2d45.6786218>

**REGISTRATION AND PARTICIPATION FEE:** The registrations of both athletes and technicians must be made exclusively online on the website <https://tesseramento.federscherma.it/> in the sports management section no later than Wednesday 14 April 2021 at 12:00.

The registration fee is € 20, which must be paid exclusively online by credit card within the above-mentioned deadline.

Please note that even the technicians will have to use the same methods of registration on the website to register their presence at the competition (there is a technician allowed for every 3 athletes).

Athletes who are not registered will not be admitted to the competitions. Only the cases in which an athlete does not appear in the lists, but who proves to have regularly registered will be taken into consideration for any admission.

**FOR ATHLETES AND TECHNICIANS COMING FROM ABROAD:** All athletes from other countries other than Italy must register by Wednesday 14 April 2021 by 12.00 by sending an email to [gironi.friuli@gmail.com](mailto:gironi.friuli@gmail.com) specifying Name, Surname, date and place of birth, membership number and club of origin and at the same time also attaching the certificate of physical fitness for competitive sports and the proof of payment made.

The registration fee of € 20 must therefore be paid by bank transfer to

IBAN no. IT95S083566485000000039752 to ASD Scherma Vittoria Pordenone within the term reported above.

Foreign technicians and athletes must compulsorily be registered as member with their federation.

**PUBLICATION OF PRE-ENROLLMENT LISTS** By 12:00 on Thursday 15 April, the list of members will be published on the 4FENCE WebFENCE website.

**GROUP PUBLICATION:** The publication of the provisional rounds will take place by 19:00 on the day before the competition. Any reports of errors in the compilation must be communicated to the number 0039-340-7311712 (computer engineer Lorenzo Cescutti) by 20:00, deadline by which the final rounds will be published.



**COMMUNICATION OF ANOMALIES AND ABSENCES** If anomalies are found in the lists of pre-registered, or absences must be reported after the closing of registrations (by 11.00 of the day before the competition), all reports must be communicated by e-mail to the address [gironi.friuli@gmail.com](mailto:gironi.friuli@gmail.com). The clubs are invited to report any absences in any case, in order to allow the smooth running of the competition and not to incur unpleasant penalties. The competition will take place when an adequate number of members is reached. Otherwise, the fees paid will be refunded

**ANTI-COVID SECURITY IMPORTANT!** Athletes and technicians who will access the sports hall are required to comply with the Protocol provided for by the FIS and the Col for the health safety management of people and spaces.

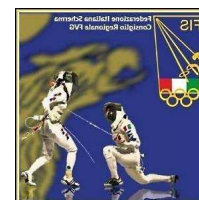
Athletes are required to have already worn the uniform as it is forbidden to use the changing rooms.

**ACCREDITATION ON THE RACE PLACE** The accreditation service will take place at the time established by the COL which will be communicated to the registered athletes and technicians grouping them by club.

Upon accreditation, each participant (athletes, technicians, staff, etc.) must present and deliver to the healthcare staff a copy of the report certifying the negativity to the COVID -19 virus following an antigenic or molecular test carried out in the 48 hours prior to the test. In addition, all participants must deliver Annex 1 (self-certification) Annex 2 (contact details) containing the contact details required by national regulations for tracking purposes. All underage athletes must have with them the "authorization for underage athlete" form duly completed and signed by their parents or by whoever exercises parental authority (attachment 4). All the documentation must be completed and signed in paper format.

Accreditation templates can be downloaded from the web page <http://schermavittoria.it> dedicated to the event will be made available (personal identification form, covid self-certification, child custody form with a photocopy of the parent's identity document). All those (technicians, athletes and staff) who will enter the competition field, after having passed the access controls and received the strictly personal pass (name bracelet), are asked to go to the seating spaces that will be assigned in the stands with an individual number. Athletes are required to wear a surgical mask. The Athletes will settle on the bleachers in the nominative place assigned to them and from which they can only move to get down on the parterre and take place in their positions (chairs) adjacent to the platform on which they will play rounds or direct elimination bouts. At the end of the rounds or at the end of the assaults by E.D. each athlete must return to the stands to the assigned place, making the movements with the above precautions. The technicians are obliged to wear the FFP2 mask and will settle on the stands in the name assigned to them and from which they can move to follow their athletes engaged in the competition.

It is recommended that the technicians and managers instruct their athletes on the behaviors envisaged by the Protocol, which is sent together with this communication.



**APPLICATION OF THE REGULATIONS** The competition will strictly observe 1) the rules of the Federal Protocol for the organization and conduct of competitive events and competitions in the discipline of fencing (published on 01/03/2021) 2) the requirements of the 2020 competitive activity review / 2021 (press release 19/21 dated 05/03/2021) and the Provisions for the performance of the competitive activity for the 2020-2021 sports season (press release 39/20 of 09/07/2020).

#### **AGREED HOTELS**

Bella Italia EFA villaggio Sport & Family

Viale Centrale, 29 – 33054 – Lignano Sabbiadoro (UD)

Phone +39 0431 409511 Fax +39 0431 409512

E-Mail: [info@bellaitaliavillage.com](mailto:info@bellaitaliavillage.com) – [www.bellaitaliavillage.com](http://www.bellaitaliavillage.com)

**MEDICAL SERVICE:** - a sports doctor will be present - there will be a Red Cross ambulance service with two paramedics

#### **COMPETITION FORMULA**

- First round of groups without eliminated
- direct elimination
- the first eight classified will be awarded

#### **MATERIAL**

it will not be possible to use the gun technicians for the pre-match check as all the material and equipment must be in compliance with the FIS regulations, functioning, in perfect order, clean and the weapons must be sanitized at the time of the check as required by Covid protocol. Worn out or non-functioning uniforms will not be allowed.

Category Year	Weapon	Blade	Guard	Mask	Uniform	Armor
2010 - 2009	Sword Fleuret	0 0-1-2	Mini	FIE CE 1600N Electrified fencing bib (Fleuret)	FIE CE 800N 350 N	Not necessary
2008 - 2007	Sword Fleuret	2-3 3-4-5	Norm	FIE CE 1600N Electrified fencing bib (Fleuret)	FIE CE 800N	FIE CE 800N

Please also read the "technical specifications" attachment available on the website <http://scher mavittoria.it>



## FACEBOOK LIVE

The competition can be followed on the Facebook page of ASD Vittoria Scherma <https://www.facebook.com/schermapordenone/>

The access link will be published half an hour before the competition start

The progress and results of the competition will be published using the 4FENCE WebFENCE software.

ATTENTION: PLEASE REMEMBER THAT FOR SAFETY MATTERS ANTICOVID19 NO food service will be set up, so the athletes, technicians and referees will have to bring what is necessary to quench their thirst and to feed themselves.

The main recommendations issued by the Department for Sport are reiterated (Annex 3)

- Respect social distancing
- Always wear personal protective equipment
- Avoid any gathering
- Wash your hands frequently
- Avoid touching your eyes, nose and mouth with your hands
- Drink only from your own bottle
- Throw away used handkerchiefs immediately in the baskets

In addition to this, we remind you that it is strongly recommended to travel and stay overnight individually or with cohabiting people (so as to avoid being considered close contact in case of positivity) and to consume food and drinks possibly in the open air, only with their cohabitants or in isolated mode.

Attached to this and downloadable on the website [www.schermavittoria.it](http://www.schermavittoria.it).

1 self-certification

2 Entry coupon

3 Safety Precautions

4 Authorization for underage athletes

In respect of sport and everyone's health, we trust in everyone's common sense

ASD Fencing Vittoria Pordenone declines all responsibility in case of accidents that may occur before, during and after the event





FEDERAZIONE ITALIANA SCHERMA

NAME OF THE CLUB: \_\_\_\_\_

**SELF-CERTIFICATION OF THE EVALUATION FORM SUGGESTIVE RESPIRATORY TRACT  
INFECTIONS RISK SARS-CoV-2  
PRELIMINARY TO PARTICIPATION IN FENCING COMPETITIONS  
(To be viewed by the club Doctor or the Reference Doctor)**

NAME

SURNAME

MEDICAL VISIT FOR SPORTS ACTIVITY WITH CERTIFICATE, DATED.....  
EXPIRY DATE MEDICAL CERTIFICATE.....  
(in the case of NON-ATHLETES, do not indicate the date regarding the certification of Sport suitability)

**You have been affected by COVID?** YES  NO

**Have you had any of these symptoms in the past 14 days?**

- Temperature >37,5°
- Cough
- Fatigue
- Sore throat
- Headache
- Muscle aches
- Nasal congestion
- Nausea
- Sickness
- Insensitivity to smell and taste
- Conjunctivite
- Diarrhea

YES  NO

**INFORMATIONS ABOUT POSSIBLE EXPOSURE TO THE CONTAGION IN THE LAST 14 DAYS**

**CONTACTS WITH PEOPLE COVID 19 POSITIVE** YES  NO   
**ORIGIN FROM RISK AREAS ACCORDING TO WHO INDICATION** YES  NO

OTHER USEFUL INFORMATION TO HIGHLIGHT ABOUT ELEMENTS RELATED TO THE POTENTIAL RISK OF EXPOSURE TO COVID-19

I, the undersigned as identified above, certify under my responsibility that the above is true, aware of the civil and criminal consequences of a false declaration, also in relation to the risk of contagion within the SPORTS facility and the practice of sports activities.

having read and understood the information on the processing of personal data attached to this form, I declare that  I agree  I do not agree to the processing of my personal data relating to the state of health contained in this form pursuant to EU Reg. 2016/679 and the existing legislation in force.

Date \_\_\_\_\_

Signature \_\_\_\_\_

ATTACHMENT 2



FEDERAZIONE ITALIANA SCHERMA

NAME OF THE CLUB:

\_\_\_\_\_

NAME

SURNAME

E-MAIL ADDRESS

Tel. No.

Date \_\_\_\_\_

signature \_\_\_\_\_



## FEDERAZIONE ITALIANA SCHERMA UNDERAGE ATHLET AUTHORIZATION

I / We, the undersigned:

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(Father: surname, first name, date of birth and identity document)

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(Mother: surname, first name, date of birth and identity document)

As in charge of the person exercising parental responsibility over his / her underage child:

Surname: \_\_\_\_\_

Name: \_\_\_\_\_

Place and date of birth\_ \_\_\_\_\_

Identity document: \_\_\_\_\_

**I declare / We declare to be immediately available after contacting the following telephone number**  
\_\_\_\_\_;

**If not immediately available and in cases of extreme and urgent urgency, I authorize the following person to act in my / our name and, possibly, also to make decisions regarding the health of my / our child:**

Surname: \_\_\_\_\_

Name: \_\_\_\_\_

Place and date of birth\_ \_\_\_\_\_

Identity document: \_\_\_\_\_

Telephone number: \_\_\_\_\_

The person is adult and is aware of the delegation conferred on him.

Father signature

Mother signature

Date and place \_\_\_\_\_



## FEDERAZIONE ITALIANA SCHERMA

### In case of single parent signature

I undersigned \_\_\_\_\_ I declare under my own responsibility to have the exclusive parental authority towards the underage.

Signature \_\_\_\_\_

Date and place \_\_\_\_\_

### REMARKS:

**please to attach a hardcopy of the valid identity document of the signatory parent / s.**