



**Host Expression of Interest Application  
1<sup>st</sup> and 2<sup>nd</sup> APC Sitting Volleyball Cup Championships  
2009 & 2011**

**Call Date 24 October 2008**

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## INTRODUCTION

The purpose of the Host Expression of Interest Application is to initiate the bidding process for 2009 and 2011 Asian Championships, **1<sup>st</sup> and 2<sup>nd</sup> APC Sitting Volleyball Cup Championships**. By completing this Application your organization will have expressed their formal interest to participate in the bid application process. The Application requires your organization to provide general information necessary for the APC.

- to create a single register of applicant organizations, thus ensuring a transparent exchange of information between the parties;
- to capture comparable information and data required to assess the initial feasibility of the potential bid applicant to meet the requirements; and
- to assess the preliminary guarantees identifying the level of support given by the various partners.

Furthermore, this information will provide the APC with the baseline information necessary for determining which applicants will be invited to participate in the bid application phase for the particular **1<sup>st</sup> and 2<sup>nd</sup> APC Sitting Volleyball Cup Championships**.

Following completion of the Host Expression of Interest Application, please submit the document via post to the address below **no later than 2<sup>nd</sup> December 2008**.

Asian Paralympic Committee  
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Kuala Lumpur, Malaysia

Phone: +6 (03) 2273-9293  
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Please answer all questions in detail and attach the relevant guarantees as requested. Applications with incomplete, missing information or received after the deadline will not be considered.

If you have any questions, please contact the APC Secretary General via email at [malini@paralympic.org.my](mailto:malini@paralympic.org.my).

**A) WHAT**  
1<sup>st</sup> and 2<sup>nd</sup> APC Sitting Volleyball Cup Championships.

**B) WHO**

B1 Please provide the name, title and contact details for the responsible person for the applicant organisation (please complete).

Sport and Year for the APC Sports Championships	
Name of Applicant Organization	
Name of Contact Person	
Title of Contact Person	
Address	
Postal Code	
City	
Country/Territory	
Telephone	
Fax	
Email	
Website	

B2 Please provide a description of the mission and objectives of the applicant organisation.

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B3 Please detail the scope and level of experience that the applicant organisation has with organizing international sporting events and in particular sport for athletes with a disability.

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### C) WHY

C1 Please provide a statement outlining the principal motivation for which the applicant organisation is seeking to host **1<sup>st</sup> and 2<sup>nd</sup> APC Sitting Volleyball Cup Championships**.

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### D) WHERE AND WHEN

D1 Please indicate the proposed Host City.

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D2 Please indicate the proposed dates for the **1<sup>st</sup> and 2<sup>nd</sup> APC Sitting Volleyball Cup Championships**.

Activity	Start Date	Finish Date
Arrival Date		
Training Dates		
Classification Dates		
Opening Ceremony		
Competition Dates		
Departure Date		

D3 Please list any other major event occurring during this time period in the Host City.

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D4 Please provide general information on the proposed competition and training venue(s), including a description of the facilities and services available, venue diagrams, FOP certification/homologation papers, brochures, etc. (provide attachments)

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**E) GENERAL INFORMATION**

E1 Please provide the current population of the proposed Host City.

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E2 Please provide information on the international ports of entry to access the Host City.

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E3 Please provide information on the means of transportation proposed for the **1<sup>st</sup> and 2<sup>nd</sup> APC Sitting Volleyball Cup Championships**.

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E4 Please provide an overview of the accommodation options, including their location, description of the facilities and services available, distance and time (kilometres and minutes) to the major ports of entry and, the competition and training venue(s). (please complete the attached Accommodation Facility Matrix)

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E5 Please provide an overview of the general accessibility provisions in the Host City.

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E6 State the altitude of the Host City in metres.

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E7 Provide official records covering the proposed days of the month over the last 5 years in the Host City (or host region), outlining the following.

Average Temperature (Celsius and Fahrenheit)	
Degree of Humidity and Precipitation (in mm)	
Number of Days of Rain	
Wind Direction and Strength	

## F) GUARANTEES AND ENDORSEMENTS

F1 Please provide a letter from the host country/territory National Paralympic Committee endorsing the Host Expression of Interest Application for the **1<sup>st</sup> and 2<sup>nd</sup> APC Sitting Volleyball Cup Championships**.

F2 Please provide letters of support from the owner(s) of the venues and accommodation facilities to be used for the **1<sup>st</sup> and 2<sup>nd</sup> APC Sitting Volleyball Cup Championships**.

F3 Please provide letters from governmental, private and/or other organisations/individuals supporting the hosting of the **1<sup>st</sup> and 2<sup>nd</sup> APC Sitting Volleyball Cup Championships**.

## G) SIGNATURE OF HOST EXPRESSION OF INTEREST APPLICATION

G1 The applicant organisation hereby certifies that this Host Expression of Interest Application has been completed truly and accurately, to the best of its knowledge. The bid applicant organisation agrees to abide by the rules and guidelines of the APC, the rules of the competition and to co-operate fully with the APC on all matters of bid process.

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**Signature**

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**Title**

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**Printed Name**

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**Organization Name**

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**Place**

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**Date**

## ACCOMMODATION FACILITY MATRIX

NAME				
<b>CATEGORY</b>				
<b>PRICE RANGE</b>				
<b>NUMBER OF ROOMS</b>				
<b>NUMBER ACCESSIBLE ROOMS</b>				
<b>DISTANCE</b>				
<ul style="list-style-type: none"> <li>• Airport</li> <li>• Train Station</li> <li>• Competition Venue(s)</li> <li>• Training Site</li> <li>• Other Accommodation Facilities</li> </ul>				
<b>POPULATION</b>				

Name – Please provide the name of each accommodation facility

Category – Please specify each accommodation facility's service rating in accordance with European Standards

Price Range – Please provide the price for each type of room/single and double occupancy/ including breakfast and all taxes indicating the currency.

Number of Rooms - Please provide the total number of rooms available for each type of room/single and double occupancy

Number of Accessible Rooms - Please provide from the total indicated the number of accessible rooms available for each type of room/single and double occupancy

Distance – Please specify the total distance in kilometers and minutes between each accommodation facility and the main international ports of entry, competition venue(s) and training sites.

Population – Please assign which population categories will be accommodated in one of the facilities. The populations include the following:

- Athletes and NPC Team Officials
- Championships Officials (Technical Officials and Classifiers)
- Paralympic Family (including IPC, World Organization for Volleyball for Disabled, APC and NPC Officials, sponsors, dignitaries and guests)
- Media (broadcasting, journalists and photographers)