

AZTECA INTERNATIONAL CUP 2025 5-A-SIDE FOOTBALL FOR THE BLIND

The Mexican Federation of Sports for the Blind and Visually Impaired (FEMEDECIDEVI A.C.) invites the member countries of IBSA and their national 5-a-side football teams for the blind to participate in our 1st Azteca International Cup 2025.

It will be an honor to welcome you to our country from September 12 to 21 of this year. This exciting and challenging competition will take place in the city of San Luis Potosí, Mexico.

All interested teams must complete the registration process and send the required documentation to the following email: femedecidevi@hotmail.com with a copy to copainternacionalazteca.fc@gmail.com.

Registration Process:

1. Send a letter of intent to participate, signed by the team leader, no later than April 15, 2025.
2. Send a confirmation letter of participation, signed by the team leader, no later than April 25, 2025.
3. The Cup will offer two registration options:
 - a) Registration fee of \$800 USD per participant (9 nights of hotel accommodation in double occupancy, with breakfast, meals, and dinners in the official dining room, internal transportation, hydration, medical services, and awards). This amount can be paid in three installments:
 - First payment: May 25, 2025: 25% of the total per person (\$200 USD per person).
 - Second payment: June 30, 2025: 35% of the total per person (\$280 USD per person).
 - Third payment: August 10, 2025: 40% of the total per person (\$320 USD per person).
 - b) Registration fee of \$650 USD per participant (9 nights of hotel accommodation in quadruple occupancy, with breakfast, meals, and dinners in the official dining room, internal transportation, hydration, medical services, and awards). This amount can also be paid in three installments:
 - First payment: May 25, 2025: 25% of the total per person (\$163 USD per person).

- Second payment: June 30, 2025: 35% of the total per person (\$227 USD per person).
- Third payment: August 10, 2025: 40% of the total per person (\$260 USD per person).

c) Payments should be made to the following bank account:

- › Bank: Scotiabank
- › Account holder: Federación Mexicana de Deportes para Ciegos y Débiles Visuales
- › CLABE Account: 044 18000 1055 487553
- › Send proof of payment to the email: femedecidevi@hotmail.com with a copy to copainternacionalazteca.fc@gmail.com.

4. Complete the registration form with the requested information for each participant.
5. Send the flight itinerary by August 25, 2025, for the participant reception logistics.
6. All the aforementioned documents can be downloaded from the following link: https://drive.google.com/drive/folders/16WLEZrd2HJA_234V3hFKt92gPvBlbDzV?usp=sharing.

We look forward to sharing this great sporting event with all the participating countries and to meeting soon on the field.

Sincerely,

Prof. Efraín Mora García.
President FEMEDECIDEVI

Date: _____.

AZTECA INTERNATIONAL CUP 2025

Letter of Intent to Participate

Through this letter, as a representative of my Federation / Association named _____, I express the interest of having our National 5-a-side football team for the blind represent us in the Azteca International Cup 2025, which will take place from September 12 to 21 in the city of San Luis Potosí, Mexico.

To ensure the proper follow-up and completion of the registration process, I designate _____ as the responsible person, who will perform the role of _____, with the contact number (WhatsApp) _____.

Thank you for your attention.

Sincerely,

Name: _____.

Signature: _____.

Contact: _____.

Date: _____.

AZTECA INTERNATIONAL CUP 2025

Letter of Confirmation of Participation

Through this letter, in my capacity as representative of the Federation / Association _____, I confirm the participation of our National 5-a-side football team for the blind, which will represent us in the Azteca International Cup 2025. Therefore, we commit to complying with each of the conditions established in the invitation, adhering to the defined payment deadlines, and submitting the requested documentation.

Thank you for your attention.

Sincerely,

Name: _____.

Signature: _____.

Contact: _____.

**Copa Internacional Azteca Futbol para Ciegos / Azteca International
Cup Blind Football**

Cédula de Inscripción / Registration Certificate

No.	Nombre	No. Pasaporte	País / nacionalidad	Función / puesto	Fotografía
	Name	Passport Number	Country / Nationality	Role / Position	Photograph
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