

INTERNATIONAL PARTICIPATION SCHEME 2024

Kindly complete all sections.

SECTION 1	DETAILS OF APPLICANT
SECTION I	DETAILS OF AFFLICATE
Amplication Date	
Application Date	
Name of Sport Organisation	
Type of Organisation	☐ Federation ☐ Association ☐ Club
Contact Mobile Number	
E-mail address	
Vat Number (if applicable)	
Name and Surname of Person Completing Form	
Position within Sport Organisation	
	Signature of person completing form:



SECTION 2	DETAILS ABOUT COMPETITION / TRAINING CAMP PLANNED
Event Name:	
Location (if already established):	
Organiser's Name:	
Month of Event:	
Number of Athletes travelling:	
Number of Coaches travelling:	
Other information relevant to the event applied for (if any):	

SECTION 3	BREAKDOWN OF EXPENSES	_		
	Flights for all contingent:	€		
	Accommodation for all contingent:	€		
	Participation Fee for all contingent:	€		
	Transfers Cost for all contingent:	€		
Total cost of above expenses for full conting		ntingent: €		
☐ Do the events applied for form	part of the International Sports Calenda	ır? □ Yes □ No		
\square Are the event applied for, being reimbursed in full / partially reimbursed by other				
If Yes, please explain:				
NUMBER OF TOURNAMENTS/TRAINING CAMPS APPLIED FOR:				
·				
For Office Use only:				
☐ Does Sports Organisation have	☐ Yes ☐ No			
☐ If yes, is repayment plan with S	☐ Yes ☐ No			
☐ Is the Sports Organisation a reg	☐ Yes ☐ No			