

INTERNATIONAL PARTICIPATION SCHEME 2025

Kindly complete all sections.

SECTION 1	DETAILS OF APPLICANT
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 r		

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 co	ntingent:	€	
☐ Do the events applied for form part of the International Sports Calendar? ☐ Yes ☐ No				
☐ Are the event applied for, being reimbursed in full / partially reimbursed by other sources? ☐ Yes ☐ No				
If Yes, please explain:				
☐ Is the sport organization already registered with AIMS?] Yes □ No	
If yes, provide AIMS Registration number: If No, indicate if the process of registration has initiated: NUMBER OF TOURNAMENTS/TRAINING CAMPS APPLIED FOR:] Yes □ No	
For Office Use only:				
☐ Does Sports Organisation have any pending dues with SPORTMALTA?			l Yes □ No	
☐ If yes, is repayment plan with SPORTMALTA in place?] Yes □ No	