



THE SPORT VOLUNTEER REGISTER SCHEME 2021

Kindly complete Section 1 (**compulsory**) and any other section in accordance with the scheme/s applied for.

SECTION 1	DETAILS OF APPLICANT
Name of Sport Organisation	
Contact Person	
Position	
Type of Organisation	<input type="checkbox"/> Federation <input type="checkbox"/> Association <input type="checkbox"/> Club <input type="checkbox"/> Foundation
Mobile Number	
E-mail address	
National Organisation affiliated with (if applicable)	
SPORTMALTA Registration No	
SportMalta Valid Certificate Attached 2020	<input type="checkbox"/> Yes <input type="checkbox"/> No
Vat Number (if available)	
Federation / Association Stamp	Signature of National Body Officer and Official Stamp:



SECTION 2

NAME OF EVENT:

DATES OF EVENT:

NUMBER OF EXPECTED PARTICIPANTS:

NUMBER OF EXPECTED VOLUNTEERS:

DESCRIPTION OF EVENT:



SECTION 3

BREAKDOWN OF EXPENSES

Do the events applied for form part of the International Sports Calendar? Yes No

For Office Use only:

Does sports organisation have any pending dues with SPORTMALTA? Yes No

Is repayment plan with SPORTMALTA in place? Yes No

Is Sports Organisation in line with Registrar requirements? Yes No

List of Volunteers / Consent Forms



VOLUNTEER REGISTER CONSENT FORM (to be completed by each volunteer)

I, the undersigned, _____ (name and surname) hereby declare that I wish to form part of the SportMalta volunteer register and authorise SportMalta to utilise my personal data provided herein, for the sole purpose of contacting me to take part in sport volunteering events, including those of other sports organisations, of which I do not form part, and that of distributing information relating to SportMalta's work throughout the year.

I understand that this data shall be held and utilised by SportMalta for an undetermined period of time, but in no way, a period of less than two years following _____ (sport organisation name) benefitting from the Sport Volunteer Register Scheme 2021.

Signature: _____

