



GOZO TRAVELLING ASSISTANCE SCHEME - TEAM

DETAILS OF APPLICANT

NAME

--

SURNAME

--

POSITION WITHIN SPORTS ORGANISATION

--

SPORTS ORGANISATION NAME

--

SPORTMALTA REGISTRATION NUMBER

--

PHONE NUMBER

--

MOBILE NUMBER

--

E-MAIL ADDRESS

--

VAT NUMBER

--

EVENT NAME

--

NUMBER OF TRIPS

--

NUMBER OF ATHLETES per TRIP

--

DATES

--

**COMPETITION ORGANISED BY
(ASSOCIATION / FEDERATION)**

--



**APPROVAL OF ASSOCIATION / FEDERATION –
CERTIFICATION OF PARTICIPATION IN MALTA
(SIGNATURE AND FULL NAME)**

STAMP

**DETAILS ABOUT DOCUMENTS
BEING SUBMITTED (RECEIPTS / INVOICES)**

TOTAL AMOUNT BEING CLAIMED

€

**FOR OFFICE USE ONLY
(AMOUNT APPROVED)**

€

SIGNATURE

OFFICIAL STAMP