



GOZO TEAM TRAVELLING ASSISTANCE SCHEME 2021

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 / TRIP

--

DATES

--

**ORGANISED BY
(ASSOCIATION / FEDERATION)**

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

--

STAMP

--

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

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TOTAL AMOUNT BEING CLAIMED

€

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

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SIGNATURE

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OFFICIAL STAMP

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