**AFFILIATED ASSOCIATION NAME:**

**AMOUNT REQUESTED (EUR):**

**DATE:**

1. **PROGRAMME/PROJECT DESCRIPTION**

< Please state title and description of Programme/Project and/or enclose project document.

1. **PROGRAMME/PROJECT/EVENT OBJECTIVES**

< Please provide the objectives of the Programme/Project >

1. **PROGRAMME/PROJECT PERIOD**

< Please provide dates for the Programme/Project>

1. **PROGRAMME/PROJECT BUDGET**

Please include summary budget for Programme/Project>

1. **PROGRAMME/PROJECT OUTCOMES OR DELIVERABLES**

< Please specify the expected outcomes/deliverables of the Programme/Project >

1. **EVENT INFORMATION (If applicable)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Dates: |  | | | City: | |
| Type of Event | □ Trainer Seminar | □ Arbiter Seminar | | | □ Tournament |
|  | □ Trainers | □ Travel Grant | | | □ Organiser Seminar |
|  | □ Chess Equipment, please specify: | | | | |
|  | □ Other, please specify: | | | | |
| Expected No of participants: |  | | Amount Requested EUR: | |  |

1. **BANK INFORMATION**
2. **ASSOCIATION**

Beneficiary Account Number:

Beneficiary Name:

Beneficiary Address:

Beneficiary Bank:

Beneficiary Bank Address:

SWIFT CODE:

IBAN (If applicable):

Intermediary Bank Name (If applicable):

Intermediary Bank Swift Code (If applicable):

Intermediary Bank Address (If applicable):

**b) BANK INFORMATION- ORGANISER/VENDOR**

Beneficiary Account Number:

Beneficiary Name:

Beneficiary Address:

Beneficiary Bank:

Beneficiary Bank Address:

SWIFT CODE:

IBAN (If applicable):

Intermediary Bank Name (If applicable):

Intermediary Bank Swift Code (If applicable):

Intermediary Bank Address (If applicable):

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Authorised Signature**

**ASSOCIATION**