



Young Talent Competition

Financial Services Commission
Mauritius

APPLICATION FORM CATEGORY 1 - QUIZ COMPETITION

Please fill in the Registration form (in BLOCK LETTERS) and send us by fax + 230 467 7172 or e-mail on ytic@fscmauritius.org. The deadline to submit the Registration Form is Tuesday 01 April 2014.

A. GENERAL INFORMATION

Participant 1

Last Name:	First Name:
Date of Birth:	Form/Level:
School/Institution:	
Contact Number:	Email:

Participant 2

Last Name:	First Name:
Date of Birth:	Form/Level:
School/Institution:	
Contact Number:	Email:

Participant 3

Last Name:	First Name:
Date of Birth:	Form/Level:
School/Institution:	
Contact Number:	Email:

B. NAME OF TEAM:

C. Authorisation of Responsible Party (Applicable for Minors)

I, the undersigned, agree that my ward participates in the Young Talent Competition organised by the Financial Services Commission, Mauritius.

Name of Responsible Party (Participant 1):

Signature:

Name of Responsible Party (Participant 2):

Signature:

Name of Responsible Party (Participant 3):

Signature:

D. Authorisation of School

Authorised Signature:	School's Seal:
Date:	

E. FOR OFFICIAL USE (ONLY)

Code:	Date of Receipt:
--------------	-------------------------

Remarks:

PARTICIPANT'S DECLARATION

We, the undersigned participants, declare that the particulars submitted in this application form are true and accurate and that we have not willfully suppressed any material fact. In addition, we declare that we have fully read and understood the Terms and Conditions of the Competition.

Signature (Participant 1): **Date:**

Signature (Participant 2): **Date:**

Signature (Participant 3): **Date:**