

Young Talent Competition 2020

Application Form - Category 2 (Quiz)

Please fill in the Application Form (in BLOCK LETTERS) and send us by fax + 230 467 7172 or e-mail on ytic@fscmauritius.org. The deadline for submission is Wednesday 26 February 2020.

A. GENERAL INFORMATION	
Participant 1	
Last Name:	First Name:
Date of Birth:	Form/Level:
Contact Number:	Email:
Participant 2	
Last Name:	First Name:
Date of Birth:	Form/Level:
Contact Number:	Email:
Participant 3	
Last Name:	First Name:
Date of Birth:	Form/Level:
Contact Number:	Email:
B. NAME OF TEAM:	

C. NAME OF SCHOOL	ZONE (PLEASE TICK):	
	Zone 1 <input type="checkbox"/>	Zone 4 <input type="checkbox"/>
	Zone 2 <input type="checkbox"/>	Zone 5 <input type="checkbox"/>
	Zone 3 <input type="checkbox"/>	

D. Details of Responsible Educator

Name:

Contact Number:	Email:
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Signature:

E. 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 Fund operating under the Financial Services Commission, Mauritius.

Name of Participant 1:

Name of Responsible Party :

Signature:	Date:
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Name of Participant 2:

Name of Responsible Party :

Signature:	Date:
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Name of Participant 3:

Name of Responsible Party :

Signature:

Date:

F. Authorisation of School

Name of School / Institution:

Authorised Signature:

School's Seal:

Date:

G. FOR OFFICIAL USE (ONLY)

Code:

Date of Receipt:

Remarks:

