

## STATE ALLOWANCE FOR RETIRED ATHLETES

## **REGISTRATION FORM**

	TO BE COMPLETED BY APPLICANT
Surname (in capital Letters)	
Other Names (in capital Letters)	
Maiden Name (If Applicable) (in capital Letters)	
NIC	
Male: Fema	ole: Others:
Postal Address (in capital Letters)	
E-mail Address	
Tel No:	

NOTE: ONLY THE HIGHEST MEDAL OBTAINED FROM EVENTS LISTED BELOW, WILL BE TAKEN INTO CONSIDERATION

Along with this form, please attach a copy of:

- New Mauritian ID card or valid Mauritian passport or birth certificate (less than 3 months)
- Mauritian Bank Account
- Character certificate
- o A certified result slip from the International Federation concerned

Olympic Games		
Paralympic Games		
World Championships		
Commonwealth Games		
Francophonie Games		
African Games/ Champions	hips	
<ul> <li>I am a Mauritian cit</li> <li>I have retired from</li> <li>I have not been cor</li> </ul>	ntioned above are correct izen of more than 35 years of age active sports career at national and international level evicted of criminal offence or doping disrepute to the sports sector and the Motherland	
Date:	Signature of Applicant	
	Signature of Applicant	
NOTE: only originals of red		
NOTE: only originals of red  DECLARATION:	quests form with signature will be taken into consideration	
NOTE: only originals of red  DECLARATION:  Name of the Federation:  Represented by:	quests form with signature will be taken into consideration	
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