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| 1. **ATHLETE INFORMATION**
 |
| Nationality: |  |
| Name: |  |
| Date of Birth (dd-mm-yyyy): |  |
| Gender: |  |
| GAL Number: |  |
| Weight Category:(Sport Class for Para) |  |
| Contact Number: |  |
| Email Address: |  |
| 1. **ATHLETE BIOGRAPHY**

**(Please briefly explain your career path in Taekwondo.)** |
|  |
| 1. **BREAKDOWN OF THE TRAINING PLAN AND EXPENSES OF USD 5,000**

**(Please describe the estimated expenses to be used for training)** |
|  |
| 1. **COMPETITION PARTICIPATION PLAN AND EXPENSES**

**(Please describe the estimated expneses to be used for participation in WT promoted/recognized competitions using the allocated scholarship)** |
|  |
| 1. **NAME AND SIGNATURE OF THE ATHLETE**
 |
| Name of Athlete: |  | Date &Signature: |  |
| 1. **AUTHORIZATION**
 |
| Name of MNA President |  | Date &Signature: |  |
| 1. **SUBMISSION**
 |
| Please fill out the application form and submit to WT Member Relations and Development through [online submission form](https://forms.gle/z71ocosewyaCxsUm9) (<https://forms.gle/z71ocosewyaCxsUm9>) by January 31, 2023. |

**Banking Information Form**

Please fill out this form and submit to WT Member Relations & Development Department member@worldtaekwondo.org.

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| Name of your Member National Association: |  |
| Name of Bank: |  |
| Address of Bank: |  |
| Bank Swift Code: |  |
| Account Number: |  |
| Name of Account: |  |
| Address of Account: |  |
| Intermediary Bank: |  |

\*For the region of Europe, IBAN no. should be confirmed.
\*For the region of America, Routing no. should be confirmed.

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| IBAN Number: |  |
| Routing Number: |  |