



ALL ODISHA CHESS ASSOCIATION

Registration No.: 23257 / 78 dated 24 September 2010

Application for Financial Assistance for Participating in National Championship Matches as Selected Participant of AOCA for Year 20__ / 20__

(To be filled in **BLOCK LETTERS**)

1. Name of Participant : _____
2. Son / Daughter of : _____
3. Postal Address : _____
(With Mobile No.) _____
4. AOCA ID: _____ Email ID: _____
5. Participated in Event: _____
(U7 / U9 / U11 / U13 / U15 / U17 / U19 / U25 / Women / Nat. Senior/ Others)
6. Entry fee paid: _____
7. Journey Details (to and fro 2nd Sleeper Class Charges)
Nearest Railway Station from Home Town: _____
Nearest Railway Station from Place of Tournament: _____
8. Account No.: _____
Name of the Acc. Holder: _____
Bank Name: _____
Branch Name: _____ IFSC Code: _____

DECLARATION

I, _____ S/o / Do _____
declare that the particulars given above are true to the best of my knowledge and belief. I also
declare that I will abide AOCA rules / guidelines amended from time to time.

Signature of Parent (for minor participant)
Place:
Date:

Signature of Participant

Enclosure: Copy of State & National Events Certificates.

ACQUITTANCE

Received an amount of ₹ _____ /- (Rupees _____
_____)

Signature of Parent (for minor participant)

Signature of Participant

----- **OFFICIAL USE** -----