



SPORTING SHOOTERS ASSOCIATION OF AUSTRALIA (SA) INC

Application for Travel Grant to Compete in an Interstate National Competition

\$100 per person

Return by Email: secretary@ssaasa.org.au CC: treasurer@ssaasa.org.au

Return by Post: State Treasurer, SSAA (SA) Inc, C/- 33 Ellemsea Circuit, Lonsdale SA 5160

Date: ____ / ____ / ____

Name: _____

Address: _____

Phone: _____

BSB: _____ Account: _____

SSAA CLUB	SSAA NUMBER

Event: _____

Location: _____

Dates: _____

Application should be made immediately when you nominate for the event.

IF YOU DO NOT ATTEND FOR ANY COMPETE FOR ANY REASON THE PAYMENT MUST BE RETURNED.

Claimant's Signature: _____

Treasurer's Signature: _____

Date Paid: ____/____/____

NOTE: Please don't assume the Treasurer has your bank details. Always give a phone number at the minimum. If your bank details aren't on this form and are not in the system your reimbursement cannot be processed. Ask to confirm details.