



Official MACI Website Document www.maci.ie

APPLICATION FORM FOR FUNDING OF MACI APPROVED CONTEST

Name of Affiliated Club			
Address of Hon Secretary			
Name of Contest			
Contest Details	Venue:	Date:	
Notification in Flight Lines	Issue:	Page No:	
Name of Contest Director		Year Qualified as CD	
Details of Classes Run, Number of entries and Names of Judges			
Class:		No of entries:	
Judges:			
Class:		No of entries:	
Judges:			
Class:		No of entries:	
Judges:			
Class:		No of entries:	
Judges:			
Class:		No of entries:	
Judges:			
Copy of Report/Results attached as per MACI Rules		YES / NO	
Are there permanent toilet facilities available on-site?		YES / NO	
If NO , is there a receipt attached for any hired toilet facilities?		YES / NO	
Are there receipts attached for food / refreshments?		YES / NO	
Are there receipts attached for any sundry items (prizes, fuel, etc)?		YES / NO	
I certify that the above details are correct and that the attached results and report are a copy of those already sent to the editor of Flight Lines and also to MACI competition secretary.			
Signed on behalf of Club:		Date:	
Name in Block Letters:		Status in Club:	

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Flight Lines issue of publication		Report, results complete and attached	Yes/No
Contest Director qualified	Yes/No	All judges qualified	Yes/No
Date received by Treasurer		Application received within 14 days	Yes/No
Is club affiliated and fully paid up (loans etc)			
Date of MACI meeting	Amount approved €	Cheque No	