ESFA U11 INTER ASSOCIATION TROPHY

TRAVEL CLAIM FORM

# This form must be completed and forwarded to ESFA HQ

District Associations that have competed in the Regional Finals / National Finals of the above competition may submit a travel claim form to the ESFA on behalf of the official party consisting of up to 10 players and 2 officials. The ESFA will meet the approved claim.

**Financial support towards the cost of travel is paid at £1 per mile.**

|  |  |  |  |
| --- | --- | --- | --- |
| This claim is for the following event | | | |
| Round (\*delete) | Regional Finals / National Finals | Date |  |
| Venue |  | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **TRAVEL** Based upon shortest AA route | | | | | | |
| Travelling from Meeting Point (please state) |  | | | | | |
| Total Number of Miles Travelled (return journey) | miles | | @ | **£ 1** | **:** | **00 p** |
| TOTAL CLAIM | | **£** | **:** | **p** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of District Association | | | |  | | | | | | | | | | | |
| Name and Branch of Bank | | | |  | | | | | | | | | | | |
| Name of Account | | | |  | | | | | | | | | | | |
| Bank Sort Code |  |  |  |  |  |  | Account Number |  |  |  |  |  |  |  |  |

*Claims must be returned to*

[competitions@schoolsfa.com](mailto:competitions@schoolsfa.com)