**ANNEX 3**

**CONFIRMATION OF PAYMENT (Before 31th, October 2024)**

Please complete this form and send to CMAS HQ and Organizing Committee by e-mail

|  |  |  |
| --- | --- | --- |
| Country: | | |
| Federation: | | |
| Telephone: | Fax: | e-mail: |

*Please ask for the bank information by contacting LOC - Local Organizing Committee by e-mail :*

[*info@cmas-sportidiving-wc.org*](mailto:info@cmas-sportidiving-wc.org)*.*

We confirm that the payment by bank transfer of euro from account # , Bank Ref. .

Date of payment .

Is our contribution for participation in this CMAS competition.

|  |  |  |
| --- | --- | --- |
|  | Date | |
| (President Signature / stamp) |  | (Full name in block letters) |
|  |  |  |