

Donor Family Network

Supporting donor families and promoting organ & tissue donation

DAVID NIX WORLD TRANSPLANT GAMES BURSARY APPLICATION FORM

Full name:
Address:
Telephone number(s):
E-mail address:
Date of birth:
Date of transplant:
Brief details of transplant:
Which team do you compete with in the British Transplant Games?
How many previous Games have you competed in?
National
For which sports(s) have you been selected to represent Team GB in the World Transplant Games?
How else are you funding the costs of the World Games / how much have you already fund raised?

Please give your reasons for your application to the David Nix Bursary:	
	Continue on separate sheet if necessary,
Signed (by Applicant):	
Date.	

Donor Family Network

DAVID NIX WORLD TRANSPLANT GAMES
BURSARY APPLICATION FORM

Application form for athletes under 18 years of age

If the Applicant named above is under 18 years of age at the date of commencement of the World Transplant Games, we will require the following details of the parent / guardian:

Full name:
Address (if different from above):
Tel. Number(s) (if different from above):
E-mail address (if different from above):
Signature of Parent / Guardian:
Date:

WHAT TO DO NEXT

Please return your completed application form to the Donor Family Network via e-mail or post to the address below. The **closing date for applications is 31st December** in the year before the World Transplant Games.

You will be informed of the outcome of your bursary application by 28th February in the year of the Games.

General Data Protection Regulations (GDPR)

We will hold applicants details only for the application of a bursary. Applicant's details will not be provided to any other party.

Registered charity number: 1098781