



## Collaboration payment form

This application form is intended as the first page of a request for payment of financial aid for cultural collaborations of Apollo. This can only be done if the financial aid has already been granted. This form must be completed, signed and handed in to Apollo in addition to an explained financial result. An application should be done two months after the collaboration event at the latest. For more details, please refer to the regulations for collaborations.

This form should be directed to Apollo, Vrijhof Room 134, University of Twente.

Name association: \_\_\_\_\_

Name contact person: \_\_\_\_\_

Phone number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Date collaboration event: \_\_\_\_\_ Date allocation: \_\_\_\_\_

Granted amount: \_\_\_\_\_ Needed amount: \_\_\_\_\_

Bank account number: \_\_\_\_\_

in the name of: \_\_\_\_\_

Completed truthfully,

Date: \_\_\_\_\_

Signature contact person

Leave this section empty

Date received: \_\_\_\_\_

Signature treasurer Apollo