

**APPLICATION FORM  
BRONZE CROSS  
50TH ANNIVERSARY COMMEMORATIVE MEDAL**



THE *scout* ASSOCIATION  
OF MALTA

NAME \_\_\_\_\_

SURNAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TEL. NO \_\_\_\_\_

MOBILE \_\_\_\_\_

NUMBER OF MEDALS DESIRED

@ EUR 20 EACH

TOTAL AMOUNT DUE

EUR

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

ALL CHEQUES ARE TO BE MADE PAYABLE TO: **THE SCOUT ASSOCIATION OF MALTA**. ALL APPLICATIONS DULY FILLED AND ACCOMPANIED BY PAYMENT ARE TO BE HANDED IN TO THE HONORARY SECRETARY. FOREIGN PAYMENT INCLUDING POSTAGE [Eur6.00 EXTRA] MUST BE ADDRESSED TO:

THE HONORARY SECRETARY  
THE SCOUT ASSOCIATION OF MALTA  
CONGREVE MEMORIAL HALL  
E.S. TONNA SQUARE  
FLORIANA VLT 16  
MALTA

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**FOR OFFICE USE**

PAYMENT: CHQ \_\_\_\_\_ CASH \_\_\_\_\_ RECEIPT NO \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE: \_\_\_\_\_

PAYMENTS TRANSFERRED TO COMM OF FINANCE

SIGNATURE \_\_\_\_\_

DATE: \_\_\_\_\_

THE **scout** ASSOCIATION OF MALTA  
Full Member of the World Organisation of the Scout Movement

Island Head Quarters, Pjazza E.S. Tonna, Floriana, FLN 1480, MALTA Telephone: +356 21 224334; Fax +356 21251382  
Website [www.maltascout.org.mt](http://www.maltascout.org.mt) Email [info@maltascout.org.mt](mailto:info@maltascout.org.mt)