

# TEAM APPLICATION FORM- 2026

Entry fee for the competition is US\$ 170 per team (inclusive of GST). Registration fees should accompany applications and are not refundable unless the class is full. Applications received without fees will not be processed. Entries sent by email should be accompanied by a copy of the demand draft of the proof of payment. Hotels/Resorts/Restaurants sending a large group of competitors can write to the organizer separately, giving names and selected classes. The organizers reserve the right to limit the number of entries in any class, and this will be done on a first-come-first- served basis.  
*Please type or fill in block capitals for legibility.*  
(Please complete all sections.)



**Deadline – 15<sup>th</sup> July 2026**

## NEW CLASS L – 23 Team Challenge – Butchery & Hot Cooking – USD 170/-

NAME OF COMPETITOR **01**: \_\_\_\_\_

NATIONALITY: \_\_\_\_\_ AGE: \_\_\_\_\_ JOB TITLE: \_\_\_\_\_

MOBILE: \_\_\_\_\_ SIGNATURE OF COMPETITOR: \_\_\_\_\_

NAME OF COMPETITOR **02**: \_\_\_\_\_

NATIONALITY: \_\_\_\_\_ AGE: \_\_\_\_\_ JOB TITLE: \_\_\_\_\_

MOBILE: \_\_\_\_\_ SIGNATURE OF COMPETITOR: \_\_\_\_\_

TEAM NAME (NATIONAL TEAM /ORGANIZATION): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

COUNTRY: \_\_\_\_\_ TEL: \_\_\_\_\_

NATIONAL TEAM / GROUP COORDINATORS NAME (IF APPLICABLE): \_\_\_\_\_

AUTHO. SIGN. OF NATIONAL TEAM / ORGANIZATION: \_\_\_\_\_

EMAIL: \_\_\_\_\_

NATIONAL TEAM/ORGANIZATION STAMP: \_\_\_\_\_

### PAYMENT DETAILS | FOR OFFICIAL USE ONLY

Enclosed herewith payment of US\$ \_\_\_\_\_  
Made payable to **Dhivehi Expo Services (Pvt.) Ltd**  
**Bank of Maldives: US\$ A/C 7701-701688-002**  
**Address: Dhivehi Expo Services (Pvt.) Ltd, C/O MJ & S, Galholhu Aage, Majeedhee Magu- 20119 Male, Republic of Maldives.**

Submission of a completed entry form shall constitute of an agreement to abide by the rules and regulations of FHAM 2026. Please photocopy if extra forms are needed. **Please do not send cash by mail.** Competitors will be advised of application outcome in due courses.

Application/Payment Received on: \_\_\_\_\_  
Bank : \_\_\_\_\_  
Amount: \_\_\_\_\_  
Remarks: \_\_\_\_\_  
\_\_\_\_\_

Organized by:



Endorsed and Supported by:

