



## INTRODUCTION & INSTRUCTIONS

*In some instances, and depending on the named competition, some student teams have the chance to win or to receive prize monetary payments. Accordingly, the details of a bank account selected to receive such payments should be entered below. To reduce the risk of potential payment processing issues, please note that details related to an organisational bank account (i.e., of a school/university) are preferred, as opposed to an individual's bank account.*

Should you be using an organisational bank account:

1. Complete all sections on the request form.

Should you be using an individual bank account:

1. Complete all sections on the request form
2. Attach a letter from your institution with the official letterhead and seal that they approve of this personal bank account being used.



**Shell  
Eco-marathon**

## **PAYMENT DETAILS REQUEST FORM – SHELL ECO-MARATHON BRAZIL 2025**

Kindly TYPE your answers to the below in BLOCK LETTERS.

**No handwritten details (except the signatures) will be accepted.**

Team ID	
Team Name	
Institution Name	

I hereby provided my consent that Shell Brasil Petróleo Ltda. and/or their appointed agent, Inizio (The Creative Engagement Group), can use and process the bank account information provided herein for:

- The disbursement of prize money for **Shell Eco-marathon Brazil 2025** as detailed in Article 241 of the [Shell Eco-marathon Brazil 2025 Rules, Chapter II](#).

I, the undersigned, declare that I am duly authorised to represent the above-mentioned Institution as a team manager, team member, faculty advisor and/or signatory of the given bank account information.

I agree to be directly contacted by The Creative Engagement Group at the below email addresses/phone numbers regarding this monetary payment.

If the form is not submitted within the deadline provided, I agree that I forfeit the right to receive the monetary payment.

I understand that I can withdraw my consent, subject to any local laws that provide otherwise, at any time. However, I do understand that withdrawal of my consent may hinder or suspend the disbursement of any monetary payments.

I confirm that the details of the bank account given below are valid. I understand that any errors in the details provided may result in a significant delay of the funds being transferred successfully.

I understand that should the transaction fail twice, I forfeit the right to receiving the monetary payment.



## Shell Eco-marathon

- If bank details are incorrect resulting in payment being made wrongly, I forfeit the right to receiving the monetary payment.
- If the bank details are incorrect resulting in further communication to provide correct details, I have 14 days from the notification date to provide accurate information or else risk forfeiting the monetary payment.
- If funds have been transferred but money not received, I will need to provide sufficient evidence to show payment has not been received.

**I understand that Shell's appointed agency are required to perform due diligence actions to verify the validity of bank details matching the stated recipient but is not liable for issues as a result of incorrect or invalid details that I provide.**

I understand that all personal data provided by this form will be processed and protected in line with the [Shell Eco-marathon Privacy Notice](#).

Please note that some countries will stipulate that the winner of prize money may be required to pay taxes on the income received. Any tax implications are the responsibility of the receiving team. Neither Shell, nor its appointed agency, takes any responsibility for any taxes due.

### **Team Manager/Member**

Full name	
Email Address	
Phone Number	
Signature	

### **Faculty Advisor**

Full name	
Email Address	
Phone Number	
Signature	

# Payment Registration Form HCPs, Delegates & Speakers

Please complete all of the mandatory fields marked '\*'.

Date\*

Address (inc Postal/ZIP Code & Country)\*

Payee Name\*

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## Payment Information:

**Payment will be made by electronic transfer. This is our preferred payment mechanism.**

Payment Currency\*

Email address for payment notification

## Bank Account\*

Name on Account

Name of Bank

Account Number

Sort Code/Routing Code/Branch Transit

Swift/BIC Code/Financial Institution

IBAN

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## Authorisation

Signature\*

Date\*

## Required Attachments

**(please tick to confirm that you have provided the attachments)**

- ☐ 1. Companies or individuals working within the US should attach a completed W8 or W9 form. Your registration cannot be processed without this documentation.
- ☐ 2. Evidence of bank details must be provided. This must include **ONE** of the following:
- ☐ Cancelled/Voided check
  - ☐ Letter from bank containing bank details (account name, bank name, branch number, account number, IBAN/SWIFT Code)
  - ☐ Letter (on company letterhead if incorporated) confirming bank details with the authorized signatory's signature
  - ☐ Blank Bank Statement (screenshot with bank information only)

Instituto Maua de Tecnologia Imt

Agência: 0188 Conta: 130005381

## Receber transferência do exterior

## Dados do Banco correspondente / Correspondent Bank Details

Banco / Bank	SWIFT
56A - Sender's Correspondent*	56A - Sender's Correspondent*
<b>STANDARD CHARTERED BANK</b>	<b>SCBLUS33XXX</b>

## Dados do Banco Beneficiário / Beneficiary Bank Details

Banco / Bank	SWIFT	Agência / Agency	Conta corrente / Account Number
57A - Beneficiary Customer*	57A - Beneficiary Customer*	59 - Beneficiary Customer*	59 - Beneficiary Customer*
<b>Banco Santander</b>	<b>BSCHBRSPXXX</b>	<b>0188</b>	<b>130005381</b>
Nome / Name	IBAN-BR	Endereço / Address	
59 - Beneficiary Customer*	59 - Beneficiary Customer*	59 - Beneficiary Customer*	
<b>INSTITUTO MAUA DE TECNOLOGIA IMT</b>	<b>BR2790400888001880130005381C1</b>	<b>R PEDRO DE TOLEDO, 1071 - SAO PAULO,</b>	
		<b>BRASIL</b>	

\*Campo de referência da mensagem SWIFT / SWIFT message fields reference

## Central de Atendimento de Câmbio

4004-2125 (Capitais e Regiões Metropolitanas)  
0800-726-2125 (Demais Localidades)  
das 09h00 às 18h00, de segunda a sexta-feira, exceto feriados.

## Serviço de Apoio ao Cliente - SAC

0800-726-7777  
Para pessoas com deficiência auditiva ou da fala:  
0800-771-0401

## Ouvidoria

Se não ficar satisfeito com a solução apresentada:  
0800-726-0322  
Para pessoas com deficiência auditiva ou da fala:  
0800-771-0301  
De segunda a sexta-feira das 08h às 22h e aos sábados das 09h  
às 14h, exceto feriados.