



FUNDED TRAVELER BANKING FORM

In order for ICANN to remit any payment to you, please do the following:

1. Provide a typed completed form below. Incomplete or handwritten forms will not be processed. List N/A if not applicable.
2. Provide a completed AND signed W9 (US entities) or W8-BEN Form (non-US entities) for all new Applicants. Name on W9 or W8-BEN Forms must match the beneficiary name.
3. Submit both forms to <https://travelrequestform.icann.org/>

New Traveler

Travel Bank Update

TRAVELER CONTACT INFORMATION

First Name /
Given Name:

Last Name /
Surname:

Primary Address:

City:

State:

Zip Code:

Country:

Phone:

Email Address:

RECEIVING BANK/ACCOUNT DETAILS

Account Type:

Checking

Bank Currency:

Saving

Tax ID:

Beneficiary Bank (Primary)

Intermediary Bank (Optional)

Full Name
(As appears on bank account)

Account Number

Transit/Domestic Routing Number
/ABA/BSB/

IBAN (If Applicable)

SWIFT Code (8 or 11 Digits)

Bank Institution Name

Bank Institution Address

Bank City, State

Bank Country

Bank Code

Branch Code