



GRANTS APPLICATION FORM

1. Full Name of Organisation: _____

2. Nature of Organisation: _____

3. Are you registered for GST: **YES /NO GST No:** . .

4. Bank Account Number . . .

Bank Deposit Slip Attached:

5. Postal Address _____

Phone: _____

Fax: _____

Email: _____

6. Key Contacts _____

Contact One: _____

Contact Two: _____

7. The Project _____

7.1 Please tell us about your project (attach additional sheets if required).

7.2 When will your project take place:

7.3 Does your organisation target a particular age group:

UNDER 25 OVER 25 GENERAL

7.4 Describe who will benefit and how from your project:

8. Money and Resources

8.1 Outline the costs of your project:

PROJECT COSTS <i>(List the costs associated with this project)</i>	\$	PROJECT INCOME <i>(How organization will contribute)</i>	\$
		Sponsorship	
		Fees/Subs	
		Fundraising	
		Loan/Mortgage/Debentures	
		\$ on hand	
		Other Grants (granted/opposed)	
		Other	
Total cost of project is Total (A)		Your contribution is Total (B)	

8.2 How much are you applying for: \$ _____ (Total A - B)

8.3 What other funding have you applied for to fund this project

8.4 Please detail amount of donated time/labour for this project

8.5 Number of members in your organisation _____

8.6 Please provide a current statement/balance sheet of your organisation's financial position

9. Is your club/organisation an Incorporated Society? Yes/No

10. Final check:

I declare the above information supplied here on behalf of my organisation is correct. If the application is successful, we agree to return a completed accountability form by the due date.

Name: _____

Signature: _____

Position in Organisation: _____ Date: _____

CHECKLIST

- Have you attached your latest audited accounts and bank statements?
- Have you answered all the relevant questions?
- Can your contact person be reached easily?

Please return this form when completed to:

Community Services, Westland District Council, Private Bag 704, Hokitika
☎ (03) 756 9047, Fax (03) 756 9045