|  |  |
| --- | --- |
| Applicant Details |  |
| Name of Applicant Organisation |  |
|  |  |
| Postal address (for correspondence) |  |
|  |  |
| Physical address of your office, clubroom, etc |  |
|  |  |
|  |  |
| Telephone | Email |
| Type of organisation/activity: |  |
|  |  |
| No of members or staff: |  |
| Contact name for application: |  |
|  |  |
| Position in organisation: |  |
| Email: | Mobile |
|  |  |
|  |  |

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| --- |
| Grant details  Purpose: Outline the reason for the application and what the grant will be used for and include relevant dates. Please be specific and if necessary attach additional information. |
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**Cost Analysis (state exactly what you want us to pay for)**

|  |  |
| --- | --- |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
| Total costs of project: | $ |
|  |  |
| Total amount requested | $ |
| Your contribution - Please advise what your contribution will be to this project. If none – please state why | |
|  | |
|  | |
|  | |
|  | |

|  |  |
| --- | --- |
| Declaration of other funding |  |
| Has an application been made to any other agency or society for funding for this purpose? | YES/NO  If yes, please provide details below |
| 1. Name of other funding organisation |  |
| Amount requested: | Status: |
| 1. Name of other funding organisation |  |
| Amount requested: | Status: |

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**Authorised Signatory Authorised Signatory**

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**Name and Position Name and Position**