

GRANT APPLICATION FORM

To: The Manager
Invercargill Licensing Trust
P O Box 208
Invercargill 9840

Name of Applicant Organisation: (should be same as bank account name)

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Address: (Street address and P O Box Number)

Telephone Number & Email:

Two contact names, addresses and telephone numbers (business and after hours):

What is the legal status and purpose of your organisation?

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How many people belong to the organisation applying? Number:

How many people would benefit from this grant? Number:

Does your organisation work with children? Yes No

If your organisation does work with children, does it have a Child Protection Policy? Yes No

Is your organisation registered with the Charities Commission? Yes CC..... No

Are you Donee Status registered? Yes No

Are you GST registered? Yes No GST No:

What is the grant to be used for? (Please be specific using separate sheet if necessary)

Date of Event: (if applicable)

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Please Supply Cost Breakdown/Budget: (use separate sheet if necessary). Please attach more than one quote for this project (if applicable)

Has the applicant organisation applied for funds for the same purpose from any other source? YES/NO (If Yes, give full details, using separate sheet if necessary)

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Total Amount Requested from Invercargill Licensing Trust in words:

\$

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PLEASE COMPLETE OTHER SIDE OF FORM ALSO

Please attach a copy of the applicant's resolution to apply for funding. This must be certified as true and correct by the Secretary of the applicant society, e.g. **Committee minutes/resolution (If applicable)**

Please attach a copy of the applicant's latest **Financial Statements**

Declaration

- We declare that the information provided in this grant application is true and correct, to the best of our knowledge, and we have the authority to make the application on behalf of the applicant.
- This organisation fully understands that any and all grant monies received from the Invercargill Licensing Trust can only be used for the purpose for which the grant was approved. Copies of invoices, receipts and bank statements (where applicable), along with any unspent funds, will be returned to the Invercargill Licensing Trust after the funds have been applied towards the purpose for which the grant was made.
- We authorise the Invercargill Licensing Trust to retain information pertaining to this application and to disclose that information as deemed necessary by the Invercargill Licensing Trust for any purpose, including the publication of grants.
- We have read, understand and accept all the conditions applicable to this application for a grant. The funds will only be used for the purpose applied for in this application.

Signature: 1

Signature: 2

Printed Name:

Printed Name:

Position:

Position:

Date:

Date:

Applicant Organisation's Bank:
Branch:
Account Number:
Name of Account:

OR attach a pre-printed deposit slip. (Personal bank accounts are not permitted)

Please keep a copy of this application for your records.

Please note applications are due two weeks prior to the Board meeting at which they are to be considered, meeting dates are available on the website.