SPORT NZ RURAL TRAVEL FUND APPLICATION FORM 2023-2024



A. Details

Name of organisation:				
Contact person:				
Postal address:				
PO Box address:				
Telephone:	Email:			
B. Contact Names				
Please provide				
1. Name	Phone			
2. Name	Phone			
C. Organisation Details				
Are you a club or a school?				
1. How many members belong to your club/school?				
2. How many participants aged between 5 & 18 will this travel subsidy benefit?				
3. How many participants are aged between 5-11 yrs				
4. How many participants are aged between 12-18 yrs				
5. Please detail how many applicants are female				
6. Please detail how many applicants are male				
7. Does your application involve a partnership with a local school / club YES/ NO				

8. What is this funding going to be used for? (Briefly explain)

- 9. Do you have any disabled individuals who are being supported by this fund?
 - a. If yes, how many will receive support from the RTF _____
- 10. What percentage of your members live in the vicinity of the local authority you are applying to for the rural travel fund?

_____%

D. Financial Details

1. Are you registered for GST? YES / NO

(If yes please write your GST Number in the space provided below) GST NO.

2. How much money are you applying for?

\$ Sport NZ funding
\$ other funders
\$ your contribution

\$_____ TOTAL

3. If you have applied for funding from other organisations please supply details - *refer to Table 1 below.*

Table 1

Organisation - (including other councils)	Amount requested (\$)	Results date (if known)

4. Do you have endorsement from your local affiliated club/school for this application for funding? (this is only relevant if the group applying is the regional body).

YES/ NO (briefly explain and attach evidence of this)

Declaration

We hereby declare that the information supplied here on behalf of our organisation is correct?

We consent to	authority collecting the		
personal contact details and info	ormation provided in this application, retaining		
and using these details and disclosing them to Sport NZ for the purpose of			
review of the rural travel fund.	This consent is given in accordance with the		
Privacy Act 1993.			

1.	Name:	
	Position in organisation / title:	
	Signature:	Date:
2.	Name:	
	Position in organisation / title:	
	Signature:	Date:

Please attach:

- 1. Latest financial statements from your organisation (i.e. P&L, financial statement)
- 2. A deposit slip (in case your application is approved)
- 3. Evidence of your endorsement from your local affiliated club/school (if required)

Checklist:

- 1. Have you answered every question?
- 2. Have you attached the relevant documents with your application?

To submit your application please complete and return this form to:



Grey District Council 105 Tainui Street Greymouth 7805



PO Box 382 Greymouth 7840



info@greydc.govt.nz