



‘Helping Hand’ Covid-19 Response Fund Application form

Section 1: Applicant Details

APPLICANT NAME
(Bowls Club/District etc)

ABN (if applicable)

**Registered for
GST?**
(please tick)

YES

☐

NO

☐

**No. Full
Members**

**Social
Members**

Total

**Contact
Person**

Position

Correspondence Address

Phone

Mobile

Fax

Email

The club has received funding for the purposes listed above from the following sources
(please specify amount):

STA

**State
government**

**Local
government**

Section 2: Funding details
(Attach separate pages if needed)

Summarise the details of what the funding will be utilised for.

Please summarise the timeframe for the project including planning period, implementation stage and a final review.

Other relevant information

Section 3: Attachments

Please attach supporting documents such as quotes that are relevant to the 'Helping Hand' fund.

Photographs, plans, brochures and other supporting documentation will be looked favorably in the assessment of your application. Please note that all documentation should be copies only as the documentation will not be returned.

Section 4: Declaration

- I/We state that the application is true and correct.
- I/We understand the application will be assessed on the information provided.
- I/We understand that submitting an application does not guarantee funding.
- I/We understand that funding is not in retrospect.
- I/We understand that funding must be used by July 31, 2022
- I/We understand that copies of quotes must be received before funding is granted and copies of invoices received after funding is granted.
- I/We have declared the funding gained from other sources.
- I/We understand that late applications will not be accepted.

Declared by – Person authorized to sign club documents

Name	<input type="text"/>	Club Position	<input type="text"/>
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Signed	<input type="text"/>	Date	<input type="text"/>
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Witnessed by

Name	<input type="text"/>	Club Position	<input type="text"/>
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Signed	<input type="text"/>	Date	<input type="text"/>
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Supported by State/Territory Association

Signed by Executive Officer	<input type="text"/>
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STA	<input type="text"/>	Date	<input type="text"/>
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BEST OF LUCK WITH YOUR APPLICATION