

**STAWELL HARNESS RACING CLUB
REQUEST FOR MINOR GRANT**

NB. All applications must be lodged on this form

Timeframe

This application **opens** Monday 14th August 2017

This application **closes** Friday 29th September 2017

The applications will be **assessed** over October 2017

The applicants will be **advised** no later than Monday 20th November 2017

Presentation Evening of grants will be held on Friday 15th December 2017

An extension may be given under certain circumstances, if you need an extension please contact Lisa McIlvride on 53581237 to discuss.

Name of applicant –

Postal address

Contact person details

Mobile Phone –

Email –

Amount requested? \$

This grant is for a financial contribution to assist **one-off** specific projects by individuals or groups who reside in the Northern Grampians Shire

Have you received financial assistance from the Stawell Harness Racing Club previously?

YES

NO

If Yes, for what activity/project?.....How much?.....

Purpose of grant/reason for request?

Proposed date(s)?

Estimated current funds available to group \$

How will the activity/project benefit the local community?

Will any other groups be contributing to this activity/project? Please provide details.

Date of Application:.....

Note: It is a condition of this application that any contributions made be acknowledged as a contribution by the Stawell Harness Racing Club toward the staging of the activity or project.

Stawell Harness Racing Club is offering Minor grants up to \$500. Successful applicants may not receive the full amount applied for.

Office use only:	Payment approved by:
	Name & Position:
	Date Approved:
	Grant Number:

Please fill this section out, if you are successful the funds will be automatically placed into your designated account.

Please arrange for the payment of our invoices to be made by EFT direct into our

Bank/Financial Institution: _____

Branch: _____

BSB Number: _____

Account Number: _____

Account Name: _____

Our preferred remittance receipt is by:

Email address: _____

Fax Number: _____

Name: _____

Position: _____

Company: _____

Address: _____

Phone: _____

Signed: _____ Date: _____

Privacy Statement: Personal information on this form will only be used by the Stawell Harness Racing Club to assist in the processing of your request and will not be disclosed without your consent except where authorised by law. You have the right to seek access and correction of your personal information.