



APPLICATION FORM - ClubGRANTS Category 2 Funding

Contact Person: _____

Organisation: _____

ABN: _____

Postal Address: _____

Email: _____

Telephone: _____

Fax: _____

Total amount of ClubGRANTS funding you are seeking: \$ _____

IMPORTANT INFORMATION

Eligible Category 1 expenditure is for projects and services that contribute to the welfare and broader social structure of the community, and are aimed at improving the living standards of low income and disadvantaged people.

Examples: Welfare Services, Community Health and/or Development Services

*For all Category 1 Projects please fill out a Category 1 Application Form.

Eligible Category 2 expenditure relates to expenditure allocated to community development and support activities and/or projects not listed under category 1.

Examples: Sporting Donations, Community Projects and/or Events

Further Information: Guidelines for the ClubGRANTS scheme are available from:

Cooma Ex-Services Club website www.coomaexservices.com.au and

ClubsNSW website www.clubsnsw.com.au

ClubGRANTS



Local clubs helping
local communities

PROJECT INFORMATION

1. Project Name: _____

2. Please provide an outline of your project (what you are planning to do or provide, e.g. details of your event, service, program etc.)

3. Who will be the main beneficiaries/target group for the project?

4. How many local residents will your project benefit?

Recipients: _____

Volunteers: _____

5. How will your project address local community needs?

6. Is the project been supported by any other organisations? If yes, who are they?

7. Is the project assisted by Local, State or Commonwealth Government funding? If so please provide details.

8. What are the proposed start and completion dates for the project?

Start Date: _____

Completion Date: _____

9. Will the CLUBGRANTS expenditure be applied outside NSW?

10. Will the project still be viable if less CLUBGRANTS funding is received than requested?

Yes No

11. Describe any direct and indirect benefits the Club may receive from supporting this request (E.g. functions, membership, advertising).

12. Please outline below the project budget for your proposal, including funding from this source (ClubGRANTS) and any other funding sources. (e.g. salaries, program costs, capital equipment, rent, etc.)

Income		Expenditure	
Description	\$	Description	\$
TOTAL INCOME	\$	TOTAL EXPENDITURE	\$

**If more room is required, please attach extra information on a new page.*

13. Has your organisation received funding from the ClubGRANTS Scheme before?

Yes No

14. If yes, in what year, for what purpose, and how much?

NOTE: Organisations that have not submitted their report or progress form from a previous ClubGRANTS application will not be considered for further funding.

Please provide the details below for payment of approved funds.

Organisation Details

Name of Organisation: _____

ABN: _____

Banking Details

Account Name: _____

BSB: _____ Account No: _____

Authority

Name: _____

Signed: _____

Date: _____

Please forward completed applications to admin@coomaexservices.com.au

Office Use Only

Approved	Yes/No	
Amount Approved		
Date		
Signed : Director		
: Secretary Manager		