

Sport New Zealand Rural Travel Fund

Application form

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

1. How many members belong to your club/organisation? _____

2. Are you a club or a school? _____

3. Will the travel subsidy benefit participants aged between 5 & 19?
YES / NO (If yes, how many participants?) _____

4. How many participants are aged between 5-12 yrs? _____

5. How many participants are aged between 13-19 yrs? _____

6. Does your application involve a partnership with a local school? YES / NO

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

8. 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 New Zealand funding)

\$ _____ (Other funders)

\$ _____ (Your contribution)

\$ _____ (TOTAL)

3. Have you applied to any other organisation for funding and if so what was the result (briefly explain)? Refer to Table 1.

Table 1

Organisation (Including other Councils)	Amount requested (\$)	Results Date (if known)

4. Do you have the endorsement of 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)

E. Travel Information

Total distance travelled (km): _____

Total number of trips: _____

Total number of vehicles used: _____

F. 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 information provided in this application, retaining and using these details and disclosing them to Sport New Zealand 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 the following

1. A balance sheet from your organisation (ie. 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?
3. Send your application form with the relevant documents to your local authority **by closing date, 30 April for winter sports and 31 October for summer sports.**

Contact:

Lani Evans, Community Partnerships Coordinator

Phone 03 543 8980

Email: lanie.evans@tasman.govt.nz

Address: 189 Queen Street, Private Bag 4, Richmond, 7031 New Zealand



Date revised: 05/04/17

Feel free to contact us:



Tasman District Council
Email info@tasman.govt.nz
Website www.tasman.govt.nz
24 hour assistance

Richmond
189 Queen Street
Private Bag 4
Richmond 7050
New Zealand
Phone 03 543 8400
Fax 03 543 9524

Murchison
92 Fairfax Street
Murchison 7007
New Zealand
Phone 03 523 1013
Fax 03 523 1012

Motueka
7 Hickmott Place
PO Box 123
Motueka 7143
New Zealand
Phone 03 528 2022
Fax 03 528 9751

Takaka
78 Commercial Street
PO Box 74
Takaka 7142
New Zealand
Phone 03 525 0020
Fax 03 525 9972