

Horizons Regional Council Community Grants Application Form

Applicant Details

Contact name of applicant:

Name of organisation:

Type of organisation:

- Incorporated Society
- Charitable Trust
- Educational facility (School/ECE/etc)
- Local community group
- Other

Details:

Is your organisation GST registered?

Yes No

If yes, please state your GST number:

Organisation's objectives:

Contact phone number(s):

Email address:

Website address:

Postal address:

Physical address:

District:

- Ruapehu
- Wanganui
- Rangitikei
- Tararua
- Manawatu
- Horowhenua
- Palmerston North

How did you hear about Horizons Community Grants Programme?

Newspaper

If so which one?

Online/ website

If so which one?

Friend/ Colleague

Other

Please explain

Application Details

Name of project:

What are the objectives of the project?

What does the project involve (i.e. what are you seeking funding to do):

Start date of project:

End date of project:

Location of project:

How will this project benefit the environment, involve the community and enhance the Horizons Region?

Are there any other partners in this project? Yes No

If yes, please describe how they are involved

Has Horizons provided funding for this project in the past? Yes No

If yes, please list previous funding received.

Please list all funding received from charitable trusts and territorial authorities over the past 24 months.

Budget

What is the total budget for the project? \$

What is the total amount (GST excl) that you are seeking from this application? Please note there is a limit of \$7,500 per application received. \$

What does this funding include?

Activity

Description

Cost

Please attach quotes if relevant

Promotion and Evaluation

Are there opportunities for Horizons staff or councillors to take part in the project?

Yes

No

If yes, please explain:

Are there opportunities to involve local media?

Yes

No

If yes, please explain further

How will you evaluate the success of the project?

Is there any other information
you believe is relevant to
support your application?

Payment Details

Direct Credit Details:

Bank:

Account Name:

Account Number:

Please attach evidence of your bank account details i.e. deposit slip. Attached

Cheque Details:

Name to be written on cheque:

Postal Address:

Checklist

I have completed all sections of the application

I have attached evidence of bank account details (if ticked via direct credit)

I have attached copies of quotes where applicable to match the breakdown of costs

I have attached evidence of landowner's permission where applicable

Applicant's Obligations

If your application is successful you agree and acknowledge on behalf of your organisation or group the following:

I agree to invoice Horizons Regional Council for the full amount by the end of May 2019.

I agree to ensure that the sponsorship amount and any products or services received as part of the sponsorship will be used solely for the activities specified in this application and for no other purposes.

I agree to provide feedback about the activity to the relevant Community Grants Committee and provide photos if available within a timeframe of one month following the sponsored activity.

If this application is on behalf of an organisation, group or other entity I confirm that I have informed them of this application and will provide acknowledgement of this sponsorship via the entity supported (i.e. on official letterhead or alternative official means).

If the project is being carried out on land not owned by the applicant I confirm that I have sought permission from the landowner to carry out planned activity.

I agree to undertake a Health and Safety Plan if required. If I'm unsure as to whether one is required I will contact Horizons Regional Council to discuss before any work is undertaken.

Name

Organisation

Signature

Date