

Lake Grace Development Association

# Community Crop Community Grants

## Application Form 2021

Applications are to be addressed to:  
Lake Grace Development Association  
Community Crop Community Grants  
PO Box 42  
Lake Grace WA 6353

### INFORMATION FOR APPLICANTS

- Applications will fall into three categories. (Minor under \$1000, medium \$1000-5000 and Large \$5000 plus)
- Funding applications will be assessed every 4 months (three times per year), starting October 4<sup>th</sup> 2021. Applications are preferred to be in minimum 2 weeks prior to allow adequate consultation/clarification
- Total funding available at each funding round is variable and up to community grants committee discretion
- Applications should be printed or typed clearly in black ink.
- Please summarise the information in the space provided on the form. If you require further space to provide the information as briefly as possible at end of application with reference to this within application.
- Grants must be acquitted within the year unless written authorisation has been made
- Unsuccessful applications need to be resubmitted each funding round if they prefer to be reassessed
- It is within the community grants committee discretion to accept/not accept any application made
- Successful applicants will be notified.

**Applicant:**

**Postal Address:**

**ABN:** \_\_\_\_\_ (If applicable)

**Registered for GST?**      YES    NO

**Contact 1:**

**Position:**

**Email:**

**Phone:**

**Contact 2:**

**Position:**

**Email:**

**Phone:**

<b>Current Membership</b>				
<b>Numbers: 20 years and over</b>	<b>Male</b>	_____	<b>Female</b>	_____
	<b>Male</b>	_____	<b>Female</b>	_____
<b>Junior (&lt; 20 years)</b>				
<b>TOTAL</b>	<b>Male</b>	_____	<b>Female</b>	_____

**Description of Organisation:**

**Project Description:**

**Benefit to Lake Grace community:**

**Other Applications or funding opportunities tried/applying for:**

**Benefit to other organisations/facility sharing:**

**Budget: (including application amount, in kind donations and volunteer labour, applicants' cash to wards project, funds from other sources. All must include GST if applicable and must be confirmed unless stated otherwise).**

**Ongoing/future costs associated with project:**

**Any other comments**

**Declaration:**

I certify the information within this application is true and correct to the best of my knowledge and have applied for this application with full consent of my organisation I represent.

Name

Position

Signature

Date