

BEST Community Shed Application Form

“BEST Community Shed” Program:

BEST supports initiatives that further its mission to eliminate disadvantage in the communities we operate. Our *BEST Community Shed* Program provides organisations, groups and charities in Inverell with the opportunity to apply for funding to assist impoverished or otherwise disadvantaged people within our local community.

Together, with our community, we are helping to take care of our own.

Organisation: _____

Auspicig Body (if applicable): _____

Contact Name: _____

Address: _____

_____ State _____ Post Code _____

Email: _____

Phone: _____ Fax: _____

ABN :

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Is your organisation registered for GST?: Y N



Please return completed form to - BEST Community Shed
Post: PO Box 175, Inverell NSW 2360
Email: marketing@best.com.au

Project/Activity Name: _____

Location of the project/activity: _____

Estimated number of participants involved in the activity: _____

Estimated age groups involved in the activity: _____

Please provide a brief description of your proposed project:

(please attach a separate page if needed)

How will your activity/project help eliminate disadvantage in your community:

(please attach a separate page if needed)

Amount of funding sought from the BEST Community Shed Fund?

\$ _____

Funding Category? (Please tick)

- Arts/Cultural Sporting Environmental Educational
- Charity Community

What will be the positive outcomes for the community:

Who (and what groups) have been involved in the planning of this project/activity? Who (what groups) will be involved in the implementation of this project/activity?

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What are the aims of the project/activity?

What will the funding pay for?

Please list other funding partners:

AUTHORISATION

I affirm, on behalf of * _____, that any funds provided by BEST Community Shed will be expended:

- Within the specified region;
- As outlined in this application

If this application is successful, our organisation agrees to submit a BEST Community Shed report, and allows media coverage.

I affirm that all details supplied in this application and attachments are true and correct to the best of my knowledge and the application form has been submitted with the full knowledge and agreement of the applicant organisation.

Signature: _____ (Chairperson / President)

Signature: _____ (Office Bearer)

Date:

* Please insert the name of your organisation



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