

GRANT APPLICATION FORM

Please use this form to apply for a grant from AHAA. Applications are made subject to the AHAA Grants Program and AHAA Objectives and Rules.

Applicant

Name of Branch/State:

Contact Person Information

Branch Manager State Representative Event Organiser

First Name: Surname:

Telephone:

Email:

Grant Details

Grant Applied for: Equipment Grant Competition Grant Match Contribution Grant

Amount applied for: \$

N.B. Maximums of \$500 for Equipment Grants, \$1000 for Other Grants

Has your branch/state applied for any grants in the current Financial Year? Yes No

Please specify the intended use of the grant. Please supply as much detail as possible (e.g. do not just write 'Equipment Purchase', specify the exact equipment proposed'.)

Advise how the intended grant use will support one of the Primary Objectives of the Association:

When will the grant objectives be completed? N.B. this should be the date reconciliation of the grant will occur, not necessarily the activity/event e.g. specific equipment for a competition may be purchased in advance of the competition itself.

Please provide details of other financial support for the Project including in fundraising and any other sponsorship options

\$	provided by
\$	provided by
\$	provided by

Please provide details of any other contributions being made towards the grant objectives e.g. volunteered labour etc.

Please provide full details of all costs associated with the Project. N.B. This must be itemised, accurate and based on genuine quotes or price estimates. Quotes or estimates may be submitted as attachments.

For Matching Contributions Grant Applications, please provide a brief summary of the grant being matched. Full details of the grant, including completed application, should be submitted as an attachment.

Acknowledgment of Reconciliation Requirements

The applicant acknowledges that all Grants must be duly and correctly reconciled upon completion. Failure to do so may result in cancellation of the grant funding, prohibition from future grant applications, or deduction from branch or state specific raised funds to offset any losses incurred.

Reconciliation must occur in accordance with the AHAA Grants Program policy.

Signature of Branch Manager

Date

Signature of State Representative

Date

Signature of Second Management Committee Representative (for Applications on a State/National Level).