

# Lake Rotoiti Charitable Trust

## Application for Funding

Date

Name of your Organisation (the applicant)

Street Address of your Organisation

Postal Address

Name of any Regional or National Association to which you are affiliated

Is your Organisation a charity or a not for profit body?

Yes  No

Name of contact person

Personal Street Address

Contacts

Phone. ( )  Mobile ( )  Email.

Describe the project this funding will be used for? (Please be specific and brief)

.....  
.....  
.....

Amount requested

\$  .00

Total cost break down for the project (Please attach quotations where applicable)

1) .....	
2) .....	
3) .....	
4) .....	
5) .....	
6) .....	
7) .....	
Total Cost	\$ .....

Are you applying, or will you apply, to any other organisation for funding for this project?

Yes  No

Does your Organisation have any funds that can be used for this project?

Yes  No

Are you GST Registered?

Yes  No

(If you are registered for GST, the Trust will not fund the GST component. If you are not registered for GST, the GST component of your project costs will be funded.)

What date do you require funds for your project?

I, ....., hereby certify that:

(Your printed name)

- I am duly authorised to sign this application on behalf of the applicant
- The above details are true and correct
- Funding will only be used for the project for which the Application was approved
- Any monies not spent on this project will be returned to the Lake Rotoiti Charitable Trust
- No person will obtain a pecuniary benefit from this Funding or from this project

..... Date .....

and further, I agree

- That the Lake Rotoiti Charitable Trust in its absolute discretion retains the right to decline this application and is under no obligation to give any reason for such decline
- To give due recognition to the Lake Rotoiti Charitable Trust for this Funding should it be approved
- The Lake Rotoiti Charitable Trust is authorised to store any of the information included in this application
- The Name of the Organisation and the project may be used for the promotional purposes of the Lake Rotoiti Charitable Trust

..... Date .....

for and on behalf of the applicant

Check List before mailing this application

- This form completed and signed in two places
- Copies of any quotations as relevant
- A copy of your bank account deposit slip
- A copy of your Organisation's latest set of accounts (**audited if required in your constitution**)

Please mail your application to:

**Lake Rotoiti Charitable Trust**  
**P.O.Box 2008**  
**Rotorua 3040**