

Community Assistance Application

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ORGANISATION DETAILS			
Name of Organisation:			
Type of Organisation:			
Address:			
Email		Phone	
CONTACT PERSON 1			
First Name:		Surname:	
Email		Phone:	
Address			
CONTACT PERSON 2			
First Name		Surname	
Email		Phone	
Address			
Description of your Organisation:			
Who and how does your organisation benefit/support the local community?			
What type of assistance are	you applying for?		
□ Cash Donation	Amount:		
□ Product Donation	Details:		
	Value:		
☐ Complimentary Room Hire	Details:		
□ Sponsorship	Details:		
	Amount:		
Other:			
How do you plan to use the	money/donation to benef	it your organisation?	
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How does your organisation support/uterlise the Buffs Club and its facilities? (eg. School graduations, presentation nights, regular meetings, social gatherings etc.)			
Please provide any further details to support your request			
Thank you for taking the time to complete this application pro	•		
application and will contact you after a decision has been mad	e.		
Declaration, Authority and consent			
The applicant declares that the application information	n is true and correct. The applicant will		
notify Buffs Club of any changes to this information or application	circumstances that may affect this		
 The applicant understands that this is an application of unding approval. 	nly and may not necessarily result in		
The applicant understands that they may be required.			
promotional/sponsorship agreement requirements ou of signage, uterlising The Buffs Club for upcoming ever			
products etc.	,		
 The applicant declares that they have the authority to terms on behalf of the stated organisation. 	be submitting and agreeing to these		
 The applicant has read and agrees to the above. 			
Applicants Signature Da	te		