

**SPORT NZ RURAL TRAVEL FUND  
APPLICATION FORM 2024-2025 – (R2 February 2025)**



<b>A. Details</b>	
Name of organisation:	
Contact person:	
Postal address:	
PO Box address:	
Telephone:	
Email:	
Do you wish to speak in support of your application:	YES                      NO
<b>B. Contact Names</b>	
Name:	
Phone:	
Name:	
Phone:	
<b>C. Organisation Details</b>	
Are you a club or a school?	Club                      School
1. How many members belong to your club/school?	
2. How many participants aged between 5 & 18 will this travel subsidy benefit?	
3. How many participants are aged between 5-11 yrs.	
4. How many participants are aged between 12-18 yrs.	

5. Please detail how many applicants are female	
6. Please detail how many applicants are male	
7. Does your application involve a partnership with a local school / club?	YES NO
8. What is this funding going to be used for?	

9. Do you have any disabled individuals who are being supported by this fund?	
a. If yes, how many will receive support from the RTF?	
10. What percentage of your members live in the vicinity of the local authority you are applying to for the rural travel fund?	%
<b>D. Financial Details</b>	
1. Are you registered for GST?	YES NO
(If yes please write your GST Number in the space provided)	

2. How much money are you applying for?		
Sport NZ Funding	\$	
Other funders	\$	
Your contribution	\$	
Total:	\$	
3. If you have applied for funding from other organisations, please supply details- <i>refer to Table 1 below.</i>		
<b>Table 1</b>		
Organisation- <i>(including other councils)</i>	Amount requested (\$)	Results date <i>(if known)</i>
4. Do you have endorsement from your local affiliated club/school for this application for funding? (this is only relevant if the group applying is the regional body).	YES	NO
<b>(briefly explain and attach evidence of this)</b>		

**E. Declaration**

We hereby declare that the information supplied here on behalf of our organisation is correct?

We consent to \_\_\_\_\_ authority collecting the personal contact details and information provided in this application, retaining and using these details and disclosing them to Sport NZ for the purpose of review of the rural travel fund. This consent is given in accordance with the Privacy Act 1993.

1. Name:

Position in organisation/title:

Signature:

Date:

2. Name:

Position in organisation/title:

Signature:

Date:

**Please attach:**

1. Latest financial statements from your organisation (i.e. P&L, financial statement)
2. A deposit slip (in case your application is approved)
3. Evidence of your endorsement from your local affiliated club/school (if required)

To submit your application please complete and return this form to:



info@greydc.govt.nz