

GRANT APPLICATION



P.O. Box 3 Wendouree 3355
Telephone: (03) 5338 1220
www.ballaratbasketball.com

Funding round closing: _____

This Application is confidential and the information which you provide will be used solely by the Foundation for the purpose of assessing your application, and will not be released to any other person or group without your consent.

APPLICANT DETAILS

Name:

Address:

Phone:

Years registered with BBA:

Club:

Complete these details if the applicant is under 18:

Age (if a junior):

Parent/guardian's name:

Applicant's basketball history:

History of representative/elite basketball:

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Details of application:

Funding requested (in dollars):	
If granted, what will the funds be applied to:	
Are there any specific opportunities that a grant will assist you with?	
Explain how a grant will improve your skills or ability to compete at a higher level:	
Has the applicant tried to source funds by other means?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please give details of other fundraising efforts:	
Other submissions in support of the application:	

Applicant's declaration:

I declare that:

- the information in this application is true and correct;
- I do not have reasonable access to funds from other sources;
- a grant will assist me to improve my skills and/or perform at a higher level; and
- if this application is successful, I will only apply funds advanced for the purpose of improving my skills or performing at a higher level.

Applicant's signature: _____

Date: _____

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Parent/guardian's endorsement

If the applicant is under 18, a parent or guardian must also sign this application.

Parent/guardian's signature: _____

Date: _____

Coach/Club/BBA Endorsement:

This application must be supported by one of the following:

- BRP Coach;
- Club officer (not being a family member);
- BBA Elite Performance Manager; or
- BBA Referee's Sub-Committee or Development Officer.

I/We support this application for a grant from the Ballarat Basketball Foundation:

Comments:

Signature:

Name:

Position:

Date:

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Lodging this Application:

Place in an envelope addressed to “**Ballarat Basketball Foundation Allocations Committee**” and post it in the Ballarat Basketball Foundation box at the Minerdome by the closing date for the funding round.

Additional Information:

If you are seeking the reimbursement of an expense already paid, please provide proof of the expenditure.

If you are seeking assistance with an expense yet to be incurred, please provide full details. If this application is successful, the Foundation may make a payment directly towards that expense.

The Foundation may require an Acquittal Statement from the applicant, detailing how funds advanced by the Foundation have been applied.