



**KAIKOURA  
DISTRICT COUNCIL**

**GEORGE LOW TRUST FUND**

**APPLICATION FORM**

**Section A: Applicant Details**

Name of Organisation \_\_\_\_\_

Postal Address \_\_\_\_\_

Street Address \_\_\_\_\_

Main Activity of the Organisation \_\_\_\_\_

Contact Person \_\_\_\_\_

Daytime phone number \_\_\_\_\_

Email Address \_\_\_\_\_

GST Number if registered \_\_\_\_\_  
(write N/A if not registered)

If your organisation is GST registered, it is very important to enter your GST number in the space above as this will affect the total amount your organisation receives from the George Low Trust Fund (i.e. GST will be added to the approved amount).

**Section B: Project Details**

Please describe what your organisation wants funding for (continue on a separate sheet if necessary)

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The George Low Trust Deed states that the funds are to be collected “for the provision of recreational equipment for the youth of Kaikoura”.

What age group will your project benefit? \_\_\_\_\_

How many people in this age group will benefit? \_\_\_\_\_

How will your project benefit your organisation or the community of Kaikoura?

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**Section C: Project Costs**

IMPORTANT: If you are registered for GST do not include GST in these costs.

List all the costs of this project	\$

The total cost of this project is \$ \_\_\_\_\_

Your organisations contribution is \$ \_\_\_\_\_

The total amount you are applying for is \$ \_\_\_\_\_

Have you received funds from any organisation in the last two years? **YES/NO**

If yes, please give details below.

Funding Organisation	\$ Granted	Year	Project

**Section D: Declaration**

*I/We hereby declare that the information supplied on behalf of our organisation is correct.  
We consent to the Kaikoura District Council collecting the personal contact details provided in this application, retaining and using these details and disclosing them to the George Low Trust Fund Assessment Committee for the purpose of reviewing the application for funding.*

Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Name \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Closing date for applications is 4pm Wednesday 7 March 2018

*Please return your application to:*

*Grants Administrator  
Kaikoura District Council  
Level 2, 96 West End  
Kaikoura  
Or mail to:  
PO Box 6  
Kaikoura*

*If you need help with your application, please contact the Council office 319 5026 or e-mail [kdc@kaikoura.govt.nz](mailto:kdc@kaikoura.govt.nz)*

**CHECKLIST:**

- Have you returned an Accountability Form for previous projects?
- Have you included your GST number if you are GST registered?
- Have you calculated your project cost excluding GST if registered?
- Do your costs add up correctly?
