**Name of group ………………………………………………………………………………..….**

**Member since …………………………………Group Membership Number …………….......................**

**Contact details**

**Contact name for group ………………………………………………………………………...**

**Postal address ………………………………………………………………………... ……………………………………………Post Code……………...**

**Telephone ……………….…………. Mobile ......……………………………...**

**Email ………………………………………………………………………...**

**Please tick the appropriate boxes**

**Incorporated body 🗖 Yes 🗖 No**

**Registered for GST 🗖 Yes 🗖 No**

**Have you previously received funding from SA Quilters? 🗖 Yes 🗖 No**

**If yes, please specify**

**Date ..………………………………………….. Amount ……………….………………..**

**Project …………………………………………………………………………...…….………...**

**Project for which funding is required**

**Name …………………………………………………………………………………...**

**Purpose**

**Education: 🗖**

**Exhibition: 🗖**

**Educational Tour: 🗖**

**Other give details: 🗖**

**Date/s** **Commence …………………………… Complete ………………………………………………...**

**Amount requested (Maximum $500-00) ………………………………………………………………………….....................................**

Is this the full cost of the project, or a portion of total cost?

**🗖 Full cost 🗖 Portion**

If appropriate, please attach a budget/breakdown of proposed expenditure

**Brief outline of the project**

[Full outline to be included as supporting attachment]

**How many people will be involved in the project? ……………………………………….**

**What benefits will be provided to the participants/ wider community?**

**……………………………………………………………………………………………………………..**

**……………………………………………………………….…………………………………………….**

**……………………………………………………………………………………………………………..**

**Who will manage the project? ………………………………………………………………….**

**What plans, appointments negotiations have already been completed?**

**……………………………………………………………………………………………………………..**

**……………………………………………………………………………………………………………..**

**……………………………………………………………………………………………………………..**

**Supporting material attached**

**🗖 Outline of Project**

**🗖 Anticipated total cost of event**

**🗖 Digital media if relevant**

**🗖 Other**

**Applicant Group’s bank account details required, to facilitate payment should an application be successful:**

**Account name: ………………………………………………………………**

**Bank: ………………………………………………………………………….**

**BSB: …………………………………………………………………………...**

**Account number: ……………………………………………………………**

**Applications must be submitted by email to the Secretary and received by 1st April each year.**

**For further information email** [**SA Quilters Secretary**](mailto:secretary.saquilters@gmail.com)**.**

**If space insufficient in any area, please attach additional sheets, clearly identifying section/s to which they refer.**