

Club .....(06) 278 4015  
Secretary Res.....(06) 278 5549  
Fax.....(06) 278 4638  
Email.....stc.john@xtra.co.nz  
Website.....www.stc.org.nz



Kindly Address Communications to:  
THE SECRETARY  
PO Box 471  
Caledonia Street,  
HAWERA, 4640

# SOUTH TARANAKI CLUB (INC)

## YOUNG PERSON'S SPONSORSHIP APPLICATION FORM

**NAME:** ..... **GENDER (M/F)**

**ADDRESS:** .....

**TELEPHONE:** ..... **DATE OF BIRTH:** .....

**SCHOOL ATTENDING:** ..... **TELEPHONE:** .....

**FORM TEACHER &/or COUNSELLOR:** .....

**SCHOOL ATTENDANCE & ACHIEVEMENTS: (Academic, Sporting, Cultural, etc). Please be specific and use extra paper as required. Appropriate evidence should also be provided by the applicant.**

.....  
.....  
.....

**REASON FOR APPLICATION:** .....

.....  
.....

**WHAT ARE YOUR SHORT / MEDIUM & LONG-TERM GOALS AND HOW DOES THIS APPLICATION (IF SUCCESSFUL) TOWARD THIS ACTIVITY SUPPORT THOSE GOALS?**

.....  
.....  
.....

**WHAT OTHER FINANCIAL SUPPORT HAVE YOU RECEIVED TOWARD THIS ACTIVITY?**

.....  
.....

**WHAT HAVE YOU PERSONALLY DONE TOWARD RAISING THE REQUIRED FUNDING TOWARD THIS ACTIVITY?**

.....  
.....  
.....

**DATES OF ACTIVITY:                      Start .....**                      **Finish .....**

**DESTINATION: (Place of activity) .....**

**SIGNATURE OF APPLICANT: .....**

**SIGNATURE OF PARENT/GUARDIAN: .....**                      **DATE: .....**

**PARENT/GUARDIAN: Member of South Taranaki Club? YES / NO. If Yes, Membership No .....**

**Please attach full supporting information or data  
FOR CONDITIONS OF APPLICATION SEE REVERSE OF THIS FORM**

**Application for a Gaming Machine Grant  
South Taranaki Club**

**1. Contact Details:**

Name of Applicant Organisation: \_\_\_\_\_

Contact person: \_\_\_\_\_

Address: \_\_\_\_\_

Daytime contact ph. no.: \_\_\_\_\_ Evening ph. no: \_\_\_\_\_

**2. Purpose:** What is the grant to be used for? (Please be specific): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**3. Total amount requested:** \$ \_\_\_\_\_

**4. Cost Breakdown:** Please supply a cost breakdown:

(Attach any formal quotes and/or breakdown from suppliers of goods and services)

\_\_\_\_\_  
\_\_\_\_\_

**5. Resolution:** Attach a copy of your organisation's (the applicant society) resolution for funding to this form. This must be certified as true and correct by the Secretary of your organisation (eg. Committee minutes or resolution as shown overleaf).

**6. Bank Details:** Complete details below or attach your organisation's printed bank deposit slip:

Bank: \_\_\_\_\_ Branch: \_\_\_\_\_

Account No:                      Account Name: \_\_\_\_\_

**Please note that payment cannot be made to the individual, but only to the relevant applicant's organisation.**

**7. Declaration:**

I, \_\_\_\_\_ (\*) have read and agree to the terms and conditions of this application. The grant will only be used for the purpose applied for and that all our records in relation to the receipt of and use of monies received will be liable and available for audit inspection by the Department of Internal Affairs.

(\* name of Secretary of applicant organisation)

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

Once all sections have been completed send to:

**The Secretary  
South Taranaki Club  
P O Box 471  
HAWERA**

EXAMPLE: Resolution to apply for funding

It was resolved that a request be made to the South Taranaki Club for funding for (purpose) for the amount of (amount).

I certify that the above is a true and correct copy of a resolution of (state committee or executive) of (state name of society/applicant organisation) dated (state date)

Signed: \_\_\_\_\_

Name of Secretary: \_\_\_\_\_

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

For Club Use Only:

- Application received by:..... Date:...../...../.....
- Considered by:..... Date:...../...../.....
- Approved / Declined
- Amount Granted: \$.....
- Cheque number.....
- Date Issued...../...../.....

## CONDITIONS OF APPLICATION

1. The applicant must be a full time Secondary School student and under the age of nineteen (19) years at the time of attending the chosen activity.
2. The applicant's family must reside within the general Hawera district. (The definition of this is to remain with the South Taranaki Club Youth Sponsorship Committee).
3. The planned activity must fall into one of the following categories:
  - Sporting, Cultural or Academic Development
  - Character Development
  - Leadership Development.
4. A short written report on the activity must be presented to the South Taranaki Club Committee within two months of the activities completion date.
5. All applicants shall comply with the activities administration and other requirements before applying for sponsorship.
6. All applications must be completed on the appropriate form and accompanied by any supporting data as applicable. Any form not fully completed will result in the application being declined.
7. The Youth Sponsorship Sub-committee of the South Taranaki Club reserves the right to make such enquiries as it sees fit to assist consideration of this applicant.
8. Only one (1) application per person per calender year will be considered.
9. Failure to be successful in one application will not in any way prejudice any further applications, provided all conditions are met.
10. All applicants will be advised of the Executive Committee of the South Taranaki Club's decision in writing.
11. Applications must be received by the South Taranaki Club no later than eight (8) weeks prior to the commencement of the activity.
12. The decision of the Executive Committee of the South Taranaki Club will be final and no correspondence will be entered into.

\* \* \* \*