

Banjima Native Title Aboriginal Corporation (BNTAC) RNTBC - ICN: 7971

1.4 SPORT & RECREATION ASSISTANCE APPLICATION FORM

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| MEMBERS DETAILS - This section <u>must</u> be completed | |
| To be eligible for this assistance, an applicant must meet beneficiary criteria as follows: | |
| <ol style="list-style-type: none"> 1. A registered Banjima beneficiary 2. A registered Daisy beneficiary 3. Birth Child registered under the above membership | |
| Members full name (incl. middle name) | |
| Child/children's names | |
| | |
| Contact phone number: | |
| Residential address: | |
| Postal address: | |
| Email address: | |
| Date of birth: | |

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| ASSISTANCE AND SUPPORT FOR SPORTING TEAMS AND CLUBS: | | |
| <i>Provides support for sporting recreation activities or events promoting team participation within a community. This assistance can provide opportunities to attend sporting activities and events with purchases associated with equipment, uniforms or registrations to participate and related costs towards travel, accommodation expenses and meals.</i> | | |
| Team Related Equipment & Materials | | |
| <input type="checkbox"/> Sport Equipment | <input type="checkbox"/> Club Registration / Event Registration | <input type="checkbox"/> Meals |
| <input type="checkbox"/> Uniforms | <input type="checkbox"/> Transport | <input type="checkbox"/> Travel <i>(please complete travel form and attach)</i> |
| <input type="checkbox"/> Sport Shoes/Boots | <input type="checkbox"/> Accommodation <i>(please complete travel form and attach)</i> | |

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|----------------------------|-----------------|--------------|-----------------------------|---------------|
| DETAILS OF REQUEST: | | | | |
| Items | Supplier | Phone | Invoice/Quote Number | Amount |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | Total | |
| Comments: | | | | |
| | | | | |

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|---|-----------------------------|-------------------------|-------------------------------|
| Sporting Club/Team Details: | | | |
| Team Name: | | Sport Club Name: | |
| Venue Location: | | | |
| Full Names of Banjima Beneficiary team members: <i>Minimum three (3) members per team</i> | Child Date of Birth: | Parents Name: | Parents Date of Birth: |
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|-------------------|--------------|
| Signature: | Date: |
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To be eligible for assistance and support, please include your application form and additional documents (i.e. birth certificate, quotes or tax invoice) which must be sent to BNTAC directly for processing.

Please tick that you have attached your documents, quote or tax invoice with your application.

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