



WA GOLF FOUNDATION

GRANT APPLICATION FORM

Please return your completed application no later than March 1, May 1, July 1 or October 1 in the year. This naturally will be dependent upon when your programme will be conducted as applications must be submitted prior to the programme commencing.

It is a requirement that you discuss your application with your local Regional Club Support Officer before submitting it.

Applications are to be forwarded to:

**WA Golf Foundation
P.O. Box 486
SOUTH PERTH WA 6951**

Or by e-mail to gary.thomas@golf.org.au

ORGANISATION DETAILS

Name of Club / District Association/ School / Organisation: _____

Address: _____

_____ Postcode _____

Telephone: (H) _____ (W) _____ Mobile _____

e-mail _____

PRINCIPAL CONTACT

Name: _____

Position Held Within Organisation: _____

Telephone: (H) _____ (W) _____ Mobile _____

e-mail _____

FUNDING CATEGORY (refer to Grants Programme Guidelines – tick one box only)

☐ Junior Development

☐ Adult Development

☐ Targeted Groups

☐ Other

☐ Innovation

PROJECT DETAILS

Project Title: _____

Project Location: _____

PROJECT OBJECTIVES

Please list the major objectives/goals of the project. Indicate how the programme will lead to the development of golf in the specified funding area.

TARGET GROUPS (indicate where applicable)

- ☐ Male
 ☐ Female
 ☐ Under 12 years
 ☐ 12-18 years
 ☐ 19 -40 yrs
 ☐ 40 yrs +
- ☐ Beginners
 ☐ High Handicapper
 ☐ Medium Handicapper

MAJOR PROJECT ACTIVITIES / ACTIONS

Please list and briefly describe the actions that will be undertaken to achieve the as listed on the previous page and state the Key Performance Indicators that will be used to measure these actions and thus the overall effectiveness of the project.

Please note that upon completion of your programme this table will need to be completed again as part of your evaluation form but will have an additional column *ACTUAL KPI ACHIEVED*.

OBJECTIVE	ACTIONS TO ACHIEVE OBJECTIVE	INTENDED KPI

LINKS TO OTHER ORGANISATIONS

Please indicate the collaboration that may occur with other organisations/media etc

PROGRAM DETAILS

Please list the following:

1. Commencement date of program:

2. Conclusion date of program:

3. Total number and length of sessions (eg. 24 x 1 hourly sessions; 4 days at 6 hours per day)

4. Person(s) conducting the coaching component of the program: (Please state if PGA Coach or Community Instructor)

5. Number of participants:

Please provide any additional beneficial information:

PROMOTION OF WA GOLF FOUNDATION

Please indicate how the WA Golf Foundation will be acknowledged and promoted during the project.

BUDGET

Please attach a **detailed budget** to this Application Form listing income and expenditure items for the proposed project, including contributions proposed from other organisations apart from the WA Golf Foundation. A **summary** to be completed below **INCLUSIVE OF GST**. If the applicant is not registered for GST, then please state so in your application.

ANTICIPATED INCOME	\$
ANTICIPATED EXPENDITURE	\$ _____
SURPLUS/DEFICIT	\$ =====

TOTAL GRANT REQUESTED

\$