

Hurlstone Park Wanderers Request for Funding Form

This form must be completed by all teams requesting funding from Hurlstone Park Wanderers

Team (Age Group/Division):.....

Coach/Manager:

CONTACT PHONE: (Daytime):.....**MOBILE:**.....

Amount of funding requested:.....

Purpose of funding request:.....

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.....

Benefit to the team/club:.....

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

Is this request to claim funds deposited with the club from your team's (and/or others) fundraising efforts?

Yes

No

If Yes, please provide details of fundraising activity (type of activity, location, date):

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.....
.....

If other teams were involved in the fundraising, please provide details of the team(s) involved.

(Age Group/Division).....

What percentage of the fundraising activity was carried out by your team?.....

Please provide details of bank account to which you wish the funds transferred:

Bank:.....

Account Name:.....

BSB:.....

Account Number:.....

CLUB APPROVAL

Print Name..... Title.....

Signature..... Date.....