



**CLUB
SOUTHSIDE**
connecting ↔ community

Community Benefit Fund Application Form

Please Note:

To be eligible to apply for a grant, your organisation must be an Incorporated Association or a School Parents and Friends Association and be eligible for Income Tax Exemption. The Management Committee of Club Southside Inc. reserves the right, under special circumstances, to consider any organisation outside of these requirements.

Applications open 1st of February 2025 and close 30th April 2025

Please mail your application to – Club Southside Grants, PO Box 539, Mt Gravatt, QLD, 4122

or

Scan and email to grants@clubsouthside.com.au

Name of Organisation:

Postal Address:

Street Address:

Email Address:

ABN:

| | | |
|---------------------------|------------------------------|-----------------------------|
| GST Registered | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Income Tax exempt | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Deductible Gift Recipient | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

Contact Person (for enquiries regarding application)

Mr Mrs Ms Miss

First Name:

Surname:

Telephone (business hours):

Fax:

Position In Organisation:

Email Address:

Details of Project to which the Grants Funds are to be applied:

(Please attach sheet if insufficient space)

Conditions of application submission:

1. A copy of the Certificate of Incorporation is to be included with the Application.
2. No correspondence will be entered into regarding the approval or non-approval of a grant.
3. Grants will be approved for successful applicants for a minimum of \$250 to a maximum of \$5,000. Only one project per application per organisation will be considered.
- 4 Where applicable, quotes supporting the application should be attached.
5. PLEASE NOTE - Upon receipt of a grant and within six months, the recipient organisation must advise the Management Committee of Club Southside Inc., in writing, details of the way the grant funds were expended. Copies of relevant invoices should be attached.

Amount of Funds Required: \$

I/We hereby certify that the above details are current and correct and agree to accept the terms and conditions as set out above.

Signed _____ President / Chairperson

Date:

Signed _____ Secretary / Treasurer

Date: