SPORT NZ RURAL TRAVEL FUND APPLICATION FORM 2025-2026

App	lication No.	(office use only)
Α.	Details	
Nan	ne of organisation:	
Con	tact person:	
Post	tal address:	
PO I	Box address:	
Tele	ephone:	Email:
В.	Contact Names	
Plea	ase provide	
1.	Name	Phone
2.	Name	Phone
C.	Organisation Det	ails
Are	you a club or a schoo	l?
1. H	How many members b	elong to your club/school?
2. H	How many participants	s aged between 5 & 18 will this travel subsidy benefit?
3. H	How many participants	s are aged between 5-11 yrs.
4. H	How many participants	s are aged between 12-18 yrs.
5. F	Please detail how man	y applicants are female
6. F	Please detail how man	y applicants are male
7 Г	Ones vour application	involve a partnership with a local school / club YES/ NO

8.	What is this funding going to be us	ed for? (Briefly ex	plain)				
	 Do you have any disabled individuals who are being supported by this fund? a. If yes, how many will receive support from the RTF What percentage of your members live in the vicinity of the local authority you are 						
	applying to for the rural travel fund?%						
D.	Financial Details						
1.	Are you registered for GST?	YES / NO					
	(If yes please write your GST No	umber in the space	e prov	ided below)			
2.	How much money are you applying for?	\$ \$ \$	other	t NZ funding r funders contribution			
3.	3. If you have applied for funding from other organisations, please supply details - refer to Table 1 below.						
	ble 1 rganisation - (including other councils)	Amount requested	d (\$)	Results date (if known)			

4. Do you have endorsement from your local affiliated club/school for this application funding? (this is only relevant if the group applying is the regional body). YES/ NO (briefly explain and attach evidence of this) E. Declaration We hereby declare that the information supplied here on behalf of our organisation is correct? We consent to authority collecting the personal contact details and information provided in this application, retaining and using these details and disclosing them to Sport NZ for the purpose of review of the rural travel fund. This consent is given in accordance with the Privacy Act 1993. 1. Name: Position in organisation / title: Date: Date: Signature: Date:								
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Signature: Date: 2. Name: Position in organisation / title:	1.	. Name:						
2. Name: Position in organisation / title:		Position in organisation / title:						
Position in organisation / title:		Signature: D	Date:					
	2.	. Name:						
Signature: Date:		Position in organisation / title:						
		Signature: D	Date:					

Please attach:

- 1. Latest financial statements from your organisation (i.e. P&L, financial statement)
- 2. A deposit slip (in case your application is approved)
- 3. Evidence of your endorsement from your local affiliated club/school (if required)

Checklist:

- 1. Have you answered every question?
- 2. Have you attached the relevant documents with your application?

3. Scan and send your application form with the relevant documents to:

Lucretia Maitland, Westland District Council communities@westlanddc.govt.nz or deliver hardcopy to the Hokitika Westland isite Visitor Information Centre, 41 Weld Street, Hokitika. If you have any questions, please email communities@westlanddc.govt.nz, or Phone 0273211816.

NOTE: Applications Close 31st December 2025.