

# “Assist Program” Application Form

Application Date:     /     /2020

Applications close for 2020, Round 1 Funding on July 31 at 5.00pm		
<b>Personal Details (person applying for the funding)</b>		
First Name:	Last Name:	
Residential Address:		
Suburb:	Post Code:	
Postal Address: (if different to residential)		
Suburb:	Post Code:	
Home	Phone:	Mobile:
E-mail:		
<b>Grant Details (who is the grant is for?)</b>		
<i>Please indicate who the funding is for: eg Myself, My Child, Team etc</i>		
Grant is for:		
First Name:	Last Name:	
Residential Address:		
Suburb:	Post Code:	
D.O.B	Gender: <b>MALE/FEMALE</b>	
Are you from Aboriginal or Torres Strait Islander decent? <b>YES/NO</b>		
Are you an Athlete with a disability? <b>YES/NO</b>		
Are you from a Non-English speaking background? <b>YES/NO</b>		
What basketball club are you a member of?		
What School do you attend?		
Are you on any sort of Scholarship at school?		
What level of basketball is the club associated with? (district/social etc)		
How many years have you been playing basketball at that level?		
<b>Funding Details</b>		
Briefly outline what the funding is for? (Fees, Travel, Equipment, Accommodation etc.)		
Carnival or Event Details:		
Location:	Date:	
<b>Funding amount sought from the Free Throw Foundation \$</b>		
Have you applied for funding from any other foundation/source? <b>YES/NO</b> If yes, please provide the details:		
Have you previously applied for funding from the Free Throw Foundation? <b>YES/NO</b> <b>If yes please provide details:</b>		

**Briefly outline why this funding is important to yourself or the person applying for this funding  
What difference will it make? How will it ensure your continued involvement in basketball?**

Financially; (How will the funding effect your current financial situation)

Need Development; (how will this help your game?)

Personal Development; (how will this help you as a person?)

Other;

**Additional Supporting Documents; (mandatory for application to be considered)**

**To assess your application we require the following support letters and documents to be included.  
Please confirm your provided documentation by circling the Y/N Section below;**

Support letters from Club/Association/School/Coach/President or Secretary:	Y/N
Detailed budget of Activity:	Y/N
Quote or copy of Invoice for Activity:	Y/N
Copy of the selection letter/documentation from the peak body running the event:	Y/N
Other (Please specify): Y/N	

**Declaration and Signature**

I understand and acknowledge that this application will be used to consider my request for funding, but does not guarantee that my application will be assessed or that I will be offered funding. I declare and confirm that all the information I have provided to the Free Throw Foundation in relation to this application is true and correct to the best of my knowledge. I give permission to the Free Throw Foundation to contact any relevant person or organisation in order to verify the information provided in this application. I understand that an approval made on the basis of untrue or incorrect information may be revoked.

**Applicant Signature**

**Date:**

**Parent/Guardian Signature**

**Date:**

*Please subscribe me to the Free Throw Foundation electronic mailing list*

**Y / N**

*Should my application be successful I may be willing to share my story / testimonial \**

**Y / N**

**How do I apply and submit the "Assist Program" application form?**

Either via the online form [www.freethrowfoundation.com.au](http://www.freethrowfoundation.com.au)

**OR** Print and complete this form, then scan and email to: [info@freethrowfoundation.com.au](mailto:info@freethrowfoundation.com.au)

**Applications close for 2020, Round 1 funding July 31 at 5.00pm**

Please e-mail any enquiries regarding this application to [info@freethrowfoundation.com.au](mailto:info@freethrowfoundation.com.au)

\*All applications are treated with the strictest of confidence, no information will be shared without written consent