

Zig Zag Foundation Ltd

Helping children in need



Application Cover Sheet

Office Use Only	
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ABOUT YOUR PROJECT

Project Name	
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Purpose of Funding: (please provide a brief description below)

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Funding Request	\$	Total Project Budget	\$
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Project Dates	from	to
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ABOUT YOUR ORGANISATION

Registered Name	
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Address	
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Phone		Fax	
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Email	
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Web	
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ABOUT YOUR OFFICIAL CONTACT

Name	
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Position	
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Phone		Fax	
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Email	
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AUTHORISATION *(Please ensure copies of certificates are attached to your application)*

<input type="checkbox"/>	I am authorised to apply for funding on behalf of the organisation above
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<input type="checkbox"/>	I agree to the Zig Zag Foundation terms and conditions of funding
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<input type="checkbox"/>	My organisation has DGR endorsement from the Australian Taxation Office
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<input type="checkbox"/>	My organisation has ITEC endorsement from the Australian Taxation Office
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Signature	
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Date	
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Comments	
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