

ACF Application Form

Form Preview

Active Communities Fund Information

The Active Communities Fund (ACF) was established by the Palmerston North City Council to help its residents remove financial barriers to participation in play, active recreation, and/or sport.

The ACF is governed by PNCC's [Support and Funding policy 2022](#).

Please read the ACF's [Information Sheet](#) before applying to the fund.

The ACF aims to remove barriers to participation through the provision of: - Activity related costs that support residents who are physically inactive to become physically active - Activity related equipment not provided through a club, school, or activity provider. - Activity uniform, clothing, or footwear. - Facility fees or Event costs. - Access to one on one or small group coaching. - Opportunities that support a life-long love of being physically active. - Travel related costs to enable participation.

Note: The ACF does not support higher level competition or representative funding costs.

Applicant's Details

* indicates a required field

Applicant's details

The applicant is the person requesting support from the Active Communities Fund.

Applicant *

☐ Individual ☐ Organisation

Organisation Name

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Home Address *

Address

<input type="text"/>
<input type="text"/>

Include street, suburb, city, and postal code.

Phone Number *

Must be a New Zealand phone number.

Email *

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Must be an email address.

Age *

Must be a number.

Sex *

- ☐ Female
☐ Male

What is your ethnicity? *

Do you (or your caregiver) hold a Community Services Card? *

- ☐ Yes
☐ No

What prevents you from being active? *

Please attach a copy/photo of your community services card

Attach a file:

Have you approached other organisations for funding/support? *

- ☐ Yes
☐ No

Have you received support from the Active Communities Fund in the past? *

- ☐ Yes
☐ No

If you have received support from the Active communities fund in the past, did you submit the report when you finished your activity? *

- ☐ Yes
☐ No
☐ N/A

E.g., If the ACF helped you to pay fees for Volleyball for a term, did you send the report at the end of the term?

Activity

Do you currently participate in a sport or active recreation activities? *

- ☐ Yes
☐ No

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What sports or active recreation activities to you participate in? *

How many times per week do you do the activity (or activities) named in the previous question? *

E.g., Volleyball twice per week, Kung Fu, once per week, etc. Write 0 (zero) if you are not currently participating in any sport or activity.

What activity are you asking support for? *

Support Needed

* indicates a required field

Support Needed

In this section you tell us what you need support with. Keep in mind that:

1. We can only support you with **up to \$500** (although, you may not receive full support for your application), 2. You need to give us invoices that we can pay on your behalf, 3. We can't give you cash or put money in your account, and 4. We cannot refund or pay retrospective costs (if approved, our support will go to activities you **WILL** participate in, not activities you have *already participated in*).

Total Amount Requested *

\$

Must be a dollar amount and no more than 500.

What is the total financial support you are requesting in this application?

Budget

Please list the items you need support with on the left and their cost on the right.

E.g. 1 term of volleyball fees ----- \$50

Expenditure	\$
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	Must be a dollar amount.

Budget Totals

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Budget Total

\$

This number/amount is calculated.

Quotes/Invoices

Please attach the quotes or invoices for the items you need help with.

Invoices/Quotes *

Attach a file:

You can attach up to five invoices/quotes here.

Caregiver Information

Caregiver Information

If you are 17 years old or less, then one of your parents or caregivers must fill this section.

Name or parent or caregiver

First name and Last name

Address (if different to the applicant's address)

Address

Phone Number (if different to the applicant's phone number)

Must be a New Zealand phone number.

Email

Must be an email address.

Sponsor's Information

* indicates a required field

Sponsor's Information

This section includes your sponsor's information.

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A sponsor is a person of high standing in the community that can support you and your funding application.

Your sponsor must be a non-relative, and can be one of the following:- A school teacher, principal, or staff member- A youth worker- A councilor- A club official or coach

Your sponsor should:

1. Be able to answer some questions about you, and
2. Be willing to support you with your report

Sponsor's Name *

First Name, Last Name, e.g. John Doe

Sponsor's Phone Number *

Must be a New Zealand phone number.

Sponsor's Email Address *

Must be an email address.

Sponsor's Address *

Address

Street, Suburb, City, Post Code

Sponsor's position/role and organisation *

e.g., School principal at Tiny Tots School

Please attach your sponsor's letter of support *

Attach a file:

How do you know the applicant, and how do you think the support will impact on the applicant's life

Conditions

* indicates a required field

Active Communities Fund Conditions

If my application is approved, I:

Will use the support for the purposes stated in this application. *

☐ Yes

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Agree to submit a report about the way the fund helped me. *

☐ Yes

Acknowledge that failure to submit the report may disqualify me from re-applying to the fund in the future. *

☐ Yes

Allow Sport Manawatū to use the information I provide to help them perpetuate the programme (the Fund). *

☐ Yes

Will abide to the conditions of the Active Communities Fund. *

☐ Yes