

Paekākāriki Community Board - Community Grants

* indicates a required field

Applicant Details

Name *

First Name

Last Name

Organisation (if applicable):

Organisation Name

Applicant Primary Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Phone Number *

Email *

Why do you need this funding? *

When do you need it? (Start date) *

Must be a date.

What are the expected benefits to you (the applicant)? *

How can you demonstrate the benefits to the Paekākāriki area as a result of providing you with this grant? *

Community Grants

Form Preview

If yes, please provide full details

Attach the following files:

- 1.A bank deposit slip, for direct credit payment if application is successful.
- 2.Supporting information that will help your application ((maximum of five pages in total).

Please note: All applications must have full documentation to support their application (maximum of five pages in total).

Supporting documentation *

Attach a file:

A minimum of 1 file must be attached.

Proof of Bank Account, for direct credit payment if application is successful *

Attach a file:

This must be a bank deposit slip or a screenshot of the bank account number.

Declaration *

- I certify that the information provided above is accurate: