

# Sport New Zealand Rural Travel Fund application form 2025

## Form Preview

### Eligibility for Rural Travel Fund

\* indicates a required field

#### Eligibility Check

**Are you applying for a Rural Sport CLUB / Team ? \***

- Yes  
 No

**Are you applying for a Rural SCHOOL Sports Club? \***

- Yes  
 No

**Is your Club or School in the Carterton District? \***

- Yes  
 No

**Is your application for regular, local sports competition? \***

- Yes  
 No

Note - this fund excludes inter-School and intra-school competitions run during school time, and excludes travel to regional or national competitions.

**If you received a grant in 2023, have you submitted your accountability report? \***

- Yes  
 No  
 N /A I did not receive a grant in 2023

Note - you are not eligible to apply for a 2024 grant if you have not submitted your 2023 Accountability report.

### Organisation Details 2

\* indicates a required field

#### Contact details

##### Applicant

- Individual       Organisation

Organisation Name

Title      First Name      Last Name

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

##### Applicant Postal Address

Address

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### Applicant Primary Phone Number

Must be a New Zealand phone number.

### Applicant Primary Email

Must be an email address.

## Organisation Details

### Are you a Club or School \*

- Club  
 School

### How many members belong to your Club / School ? \*

### Does your application involve a partnership with a local School / Club? \*

- Yes  
 No

### What percentage of your members live in the Carterton District?

## Sport Participants

### How many participants aged between 5 and 18 years will this subsidy benefit? \*

### How many are aged between 5 - 11 years? \*

### How many participants are aged between 12 - 18 years? \*

### How many participants are female?

Must be a number.

### How many participants are male?

Must be a number.

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**How many disabled individuals are participating?**

Must be a number.

## Funding purpose

Funding:

**What is this funding going to be used for?**

Word count:

Must be no more than 500 words.

## Financial Details

\* indicates a required field

### Budget

| <b>Income</b>  | <b>\$</b> | <b>Approved or Pending?</b> |
|--|-----------|-----------------------------|
| If you have applied to other Councils, organisations or funders, please list details here. Ensure you enter the amount you are asking for from CDC in the top row. |           |                             |
| Carterton District Council Sport NZ Fund request:  | \$        |                             |
|  | \$        |                             |
|  | \$        |                             |
|  | \$        |                             |
|  | \$        |                             |
|  | \$        |                             |
|  | \$        |                             |
|  | \$        |                             |

### Budget Totals

**Total Income Amount**

\$

This number/amount is calculated.

**Is your Club or School contributing funds also?**

- Yes  
 No

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**If yes, How much?**

**Please upload your latest financial statements from your organisation:**

Attach a file:

**Do you have endorsement from the local affiliated Club or School for this application ( ONLY answer this if the group applying is the Regional Body.)**

**Please upload supporting evidence.**

Attach a file:

## GST and Banking details

### Bank Account

Account Name

Account Number

Must be a valid New Zealand bank account format.

**Please upload a copy of your bank account details**

Attach a file:

**Is your organisation GST registered? \***

- Yes  
 No

**Enter your GST number here:**

Must be a number.

## Declaration

\* indicates a required field

## New Section

**We consent to Carterton District Council 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**

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**Fund. Please refer to the Privacy Statement, <https://cdc.govt.nz/your-council/publications/privacy-policy/> \***

Yes

We hereby declare that the information supplied here on behalf of our organisation is correct:

**Contact Person Name: \***

**Position in Organisation / Club: \***

**Second Contact Person Name: \***

**Position in Organisation / Club: \***