



TASMANIAN MASONIC BENEVOLENT FOUNDATION EST. 1843

FREEMASONS TASMANIA COMMUNITY GRANT APPLICATION FORM

Applicant Organisation Information

In this form, "Applicant" refers to the entity being considered as a Grant recipient

Legal Name of Applicant: (Including any suffix Pty Ltd, Inc etc)	
Full Address: (Principal place of business and address for purposes of communications with Freemasons Tasmania)	
Website:	
ABN:	
Application Representative:	Name: Position:
Applicant Representative Contact Details:	Email: Direct Telephone:
Provide a summary of the Applicant: (organisation, group, club, committee)	
Type of organisation: (As per current ABN registration)	
Is the Applicant registered for GST?	If yes. provide ABN details
Is the Applicant government or state owned or controlled?	If yes. provide details
Do any individuals hold or own any shares or other interests (directly or indirectly) in the Applicant, such that they are an ultimate beneficial owner of the Applicant?	If yes. provide details
In the past 5 years, has the Applicant (including any director, board member, or member of the Applicant's senior management team) been the subject of any investigation, allegation or prosecution for corruption, bribery, fraud, false accounting, tax evasion or other related serious conduct?	If yes, provide details and include attachments:

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Provide the names of all executives, directors, board members and ultimate owners of the Applicant (attach a list where necessary).

Name:	Position Title:

Provide the Applicant's bank details (this will be used should the application be successful).

Note: this question is not required for Matched Giving Charities.

Bank and Branch:			
Account name:			
BSB Number:		Account Number:	
Two Authorised signatories: (include full name and position)	Signatory 1:	Signatory 2:	

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Project or Service Details			
In this form, "Project or Service" refers to the ultimate use of the funding being sought from Freemasons			
Project or Service Name:			
Start and end date of Project or Service / expected timeframe to undertake the activity:			
Describe what need the Project or Service addresses in the community and why Freemasons Tasmania should support this activity?			
What amount of Grant is requested? (3 x Grant categories \$2,250, \$3,250 or \$6,000):	Grant Amount	\$	Other Funding
Detail how this Grant will be used.	\$		
Which community will benefit from the Grant requested from Freemasons Tasmania?			
What will be the lasting impact of the Project or Service for the community?			
How will Freemasons Tasmania's support be recognised?			
Are any third-party vendors being engaged to assist in delivering the Project or Service?	If yes, provide details		
Has the Applicant received support from Freemasons Tasmania previously?	If yes, provide details		

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Legal Declaration

In this form, the lead person in the Applicant organisation (e.g. chairperson, director, CEO) must complete and sign this section

I, being duly authorised to execute this Freemasons Tasmania Community Grant Application Form and to certify as to the matters set forth herein, certify that all information is complete and correct.

Name and Title:	
Signature of duly authorised officer:	
Date:	

Please submit completed and signed form via email only.