



Shire of Trayning
PO Box 95
Railway Street
TRAYNING WA 6488
Email: admin@trayning.wa.gov.au
Ph: (08) 96831001

Community Grant Application Form

Date: _____

Name of Group: _____

Contact Person: _____

Address: _____

ABN: _____

Association Number (IARN): _____

Amount of Grant Requested:

Detail the anticipated income for the current financial year:

Detail the anticipated expenses for the current financial year:

Expected Bank Balances as at 30 June for the current financial year:



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Details of any fundraising activity held in the last financial year (including sum of money raised):

Details of any fundraising activity held in this financial year (including sum of money raised):

Give a detailed budget for how the grant will be used (please attach a minimum of two written quotations where applicable):

Any further relevant information:

Please return completed Community Grant Application Forms and any other relevant documents to admin@trayning.wa.gov.au