



**Important: - All applications must be submitted to the Halberg Trust Sport Opportunity Adviser at your Regional Sports Trust by the 20th of the month to ensure consideration at the following month's meeting.**

**Activity**

**Office Use**  
**Ref No:**

*Please note:*  
*Funding will not be provided in retrospect. (Lessons must not commence until application has been approved by the Halberg Trust)*

Date lessons start: \_\_\_\_\_ Cost per lesson: \_\_\_\_\_  
 No. of lessons: \_\_\_\_\_ Time period of lessons: \_\_\_\_\_  
 Type of lessons: (i.e. group lessons, individual lessons, both) \_\_\_\_\_  
 Lessons being held at: \_\_\_\_\_

Equipment: (quotes required)

Other:

In future should you no longer need this equipment and would like it to be recycled please contact The Halberg Trust Head Office. Would you like to be part of the recycling programme in future if the recipient of the equipment no longer needs it?  
 Yes  No  Not Applicable

How did you hear about the Halberg Trust Activity Fund?  Regional Sports Trust  Doctor/GP  Halberg Trust Website  
 Google search  Word of mouth  School  Sport Opportunity Adviser  Other \_\_\_\_\_

**Applicant to sign:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return completed form and all necessary supporting information to the Sport Opportunity Adviser at your Regional Sports Trust.**

**Halberg Trust Sport Opportunity Adviser (SOA) from your Regional Sports Trust to sign below:**

SOA Name \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

**OUTCOME**

*Office Use Only*

Approved (incl. GST) \$ \_\_\_\_\_

Declined

Resubmitted

Comments: \_\_\_\_\_

**Payment will be made directly to the supplier/provider. Please take this approval with you and ask them to send an invoice for the approved amount to: - Halberg Trust, P O Box 11-487, Ellerslie, Auckland.**

**Please Note: - Approved applications are only valid for 6 months.**