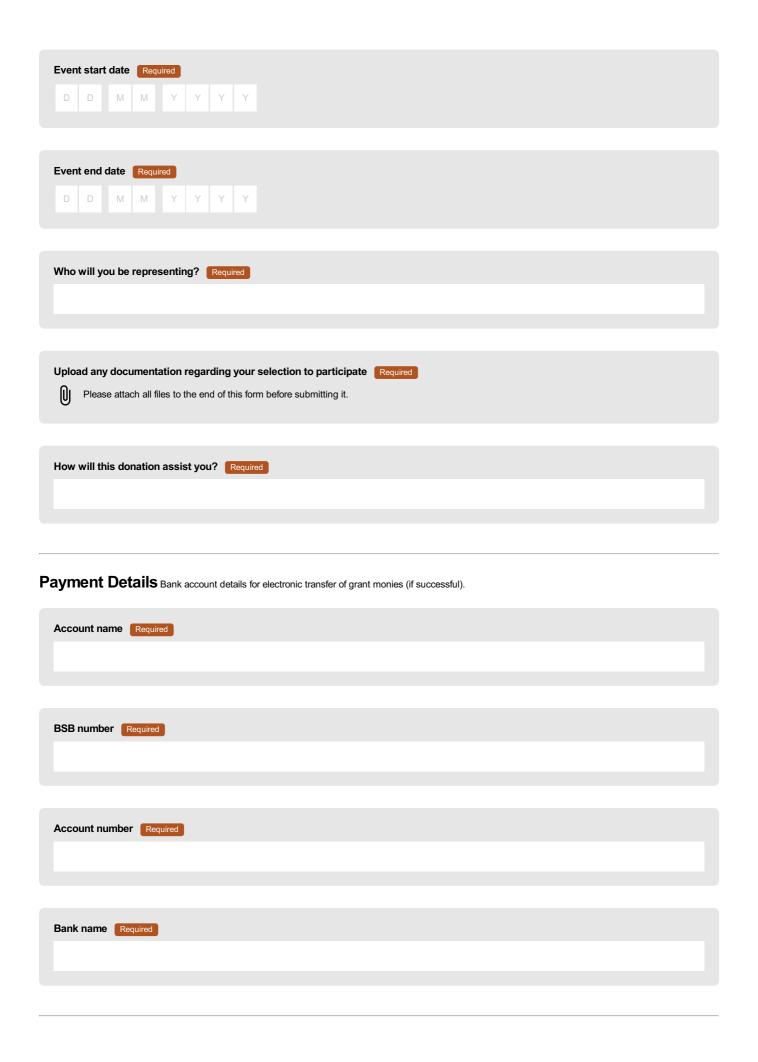
## **Community Sponsorship Fund**



## **Applicant Information**

Name Required
Date of birth Required
Gender (Select 1 option)  Required  Male
Female Prefer not to say
Address Required
Suburb (Select 1 option) Required
Number Required
Email Required

## **Event Details**



## **Declaration**

I confirm that the information provided in this application is true and correct.

Signature Required	
Date Required  D D M M Y Y Y Y	
For applicants under 18 years	
Parent/guardian name	
Parent/guardian signature	

End of form

Don't forget to attach all files before submitting this form