



## IWD – Funding Application Form 2018

(All information contained in this application will be considered confidential.)

**Your/Organisation Name:**

.....

**Contact Name:** .....

**Address:** .....

**Suburb:** ..... **Postcode:**.....

**Phone:** ..... **Mobile:** .....

**Email:** .....



**Please summarise your/Organisation's background and services. (Max 250 words)**

**How will the IWD funding benefit you/the Organisation? (Max 250 words)**



Please outline any further interesting information or details of you/the Organisation which you think may be relevant. (Max 150 words)

**Disclaimer**

By submitting this application, I acknowledge that all information contained is correct and truthful to the best of my knowledge. If I am a recipient of the IWD Funding I/we agree to attend the International Women's Day Illawarra Luncheon in March 2018 as a beneficiary of the luncheon funds. We agree to submit a follow-up report within 6 months of receiving the funding.

I agree.      Signature:.....Date: .....

**IMPORTANT – PLEASE READ**

**Mail or send your application to:**  
**International Women's Day – Illawarra | ATT: Helen Volk**  
**PO Box 631 Wollongong NSW 2520 | Fax: 02 4228 5585 |**  
**Email: [info@iwdillawarra.com.au](mailto:info@iwdillawarra.com.au) |**