**Auckland Golf Travel Grant (AGTG)**

**Always open for applications?**

Yes and in general applications will be considered at next Board meeting.

**Eligibility**

Must be a member of Auckland Golf Interprovincial (juniors or seniors) representative programme within the past 2 years.

Must be eligible to represent NZ

**Available to groups or individuals?**

Groups may not apply

**History**

An initiative to support Auckland representatives that are attending overseas events and looking for support for their travel.

**Objectives**

To support Auckland Representative players with national representation costs (not covered by GolfNZ) and/or who are travelling internationally to tournaments in order to further their development as a professional golfer or work towards becoming a professional golfer

**Projects funded**

Travel costs for players that could include:

GolfNZ camp costs (inc travel)

Entry fees to tournaments

Air travel

Travel insurance

**Activities funded**

Expenses to enable the player(s) to carry out their objectives and services.

**Excluded activities**

Costs for clothing, equipment or non-essential items

**Funds available**

$10,000.00 per annum (Jan – Dec)

**Upper limit per grant application**

Up to $1,000 in general but likely to be a limit of $500

#### How to apply

Send information to

[info@aucklandgolf.nz](mailto:info@aucklandgolf.nz)

with a cover letter and the following information:

#### Information required with your application

**Application form accompanied by:**  
• Detailed budget for project

• Detailed itinerary  
• How much funding is requested  
• Which other organisations/schemes have been asked for funding  
• Which other organisations/schemes have given funding for this project

#### Decision makers

AGI board following recommendations from grants sub-committee

#### Decision time

Acknowledgement that application has been received.  
Notified of decision within one week of board closing date whether grant was successful or not.

#### How notified

• Acknowledgement of application will be advised by email  
• Letter to say if application was successful or unsuccessful within one week of closing date by e-mail

#### How paid

Entire payment made after grant approved  
GST registered applicants will be required to forward an invoice for grant allocation plus GST

#### Conditions of acceptance

• Must complete an accountability form confirming how grant has been spent  
• Must send copies of receipt/s

• Must supply AGI with report and preferably updates during the players tour

• Funding and reconciliation must be undertaken within 3 months of receiving money

#### Other information

#### • players may only apply once per year

#### • funding will not be paid retrospectively, unless under exceptional circumstances.

#### Application Form

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| **Details** | | | | | | |
| Name: | | | | | | |
| Club id: | | | | | | |
| Club: | | | | | | |
| DoB: | | | | | | |
| Contact phone: | | | | | | |
| Contact e-mail: | | | | | | |
| Auckland Representative teams and dates: | | | | | | |
| **Proposal for financial assistance** | | | | | | |
| What is the proposed project/activity that you are seeking financial assistance for?: | | | | | | |
| What is the amount of financial assistance that you are applying for? | | | | | | |
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| **Itinerary** | | | | | | |
| Please list here the travel details for your tour | | | | | | |
| **Date** | **Venue** | | |  | |  |
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| **Details of other support received/applied for** | | | | | | | |
| **Organisation** | | **Amount** | **Support towards** | | **Received** | | |
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| **Declaration** |
| We, the undersigned persons, hereby declare that the information supplied here on behalf of the player is correct. |
| Name of person completing form:……………………………………………………………………….  Signed : …………………………………………………………….. Date: ……………………………..  Daytime Contact Number: ……………………………………………………………………………..  Parent/Caregiver (if player is 18 years or under as the end of the year of application):  …………………………………………………………………………….  Signed: ………………………………………………….……….. Date: …………………………….  Daytime Contact number: …………………………………………………………………………….  *The above persons may be contacted during the day if clarification of information is required.**For information about how we collect, use and store personal information please refer to our Privacy Statement on our website.* |