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| --- |
|  Applicant’s Details |
| Organisation :  |
| Address :  |
| Contact Person :  Phone No :  |
| Email Address :  |

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| Application |
| Describe your organisation: |
| Can you briefly tell us how $250 will assist your organisation through this crisis please? : |

|  |  |
| --- | --- |
| Application amount : |  **$250.00** |

I declare that all information supplied is truthful and accurate, that I’m fully aware that the ULF Board makes the decision on this application, that their decision is final, and there is no appeal process.

Applicant’s Signature: Date:

**Email completed form to:** secretary@upperlachlanfoundation.com

**OR post to “ULF, PO Box 242, Crookwell NSW 2583”**