



**SUNSHINE ASSOCIATION
Of Tasmania Inc (North)**

Email: sunshinenorth@lionstasmania.org
or
PO Box 25 Kings Meadows 7249

APPLICATION FOR FINANCIAL ASSISTANCE

NAME OF SCHOOL / ORGANISATION:

FULL POSTAL ADDRESS:

**NAME OF CONTACT PERSON:
PHONE:**

ACTIVITY/NEED (INCLUDING DATE):

DETAILS OF ABOVE INCLUDING VALUE OR PURPOSE FOR CHILD/CHILDREN:

NAMES OF CHILD/CHILDREN INVOLVED. (ATTACH LIST IF APPORPRIATE):

REASON WHY FINANCIAL ASSISTANCE IS SOUGHT:

COST DETAILS	PER CHILD	TOTAL
TOTAL COST:	\$	\$
Amount requested by Sunshine Association:	\$	\$
Parent Contribution:	\$	\$
Other Subsidy:	\$	\$

**SIGNED:
DATE:**

POSITION:

Updated June 2025