

# REQUEST FOR REGIONAL FUNDING / CERTIFICATES

send to: **PPTA TE WEHENGARUA NATIONAL OFFICE**

Fax: (04) 382 8763

Post: PO Box 2119, Wellington

Email: [mbarton@ppta.org.nz](mailto:mbarton@ppta.org.nz)

TODAY'S DATE: \_\_\_\_\_

REGION: \_\_\_\_\_

COORDINATOR: \_\_\_\_\_

COMMITTEE  
MEMBERS: \_\_\_\_\_

NAME OF BANK: \_\_\_\_\_

BRANCH: \_\_\_\_\_

NAME ON A/C: \_\_\_\_\_

ACCOUNT NO.

(Bank / Branch) 2 + 4 digits					(Account Number) 7 digits							(A/C Type) 2-3 digits							

(DEPOSIT SLIP **MUST** BE ATTACHED TO CONFIRM ACCOUNT NUMBER)

**FUNDS REQUESTED**

**TICK**

ADMINISTRATION GRANT:	\$ <u>\$1,000</u>	<input type="checkbox"/>
TE TAURA WHIRI SUBSIDY	\$ <u>\$2,666</u>	<input type="checkbox"/>
REGIONAL TRAVEL:	\$ _____	<input type="checkbox"/>
RETURNING TROPHIES:	NO. OF TROPHIES _____ @ \$50 PER TROPHY = \$ _____	<input type="checkbox"/>

**CERTIFICATES**

Certificate of Merit	English	.....	(No. required)
	Māori	.....	(No. required)
Certificate of Participation	English	.....	(No. required)
	Māori	.....	(No. required)