

2018 Equestrian Queensland Sport Development Funding Program PROGRAM 3: EQ Sport Committees Officials Development



This application form is for EQ Sport Committees Officials Development

EQ SPO	RT COMMITTEE ((Discipline)							
What is	L ADDRESS s the postal address of your organisation? (Include suburb/town, state and postcode. ame as street address please write "as above".)								
CLINIC/	WORKSHOP DAT	E AND VENUE							
Date:									
Present	er:								
Course	Details:								
Does th	is course carry EA/	FEI Approved st	tatus?	YES	NO	Other:			
	WORKSHOP COC the name of the			ible for this	application	on and the re	levant contact		
	- NOTE: All emai								
Title	(Mr/Mrs/Ms)	First Name			Surnam	ie			
Phone		Mobile			Disciplin	ie			
		@		12.00.0					
Email									
PARTIC Please _I	PANT provide the expe	cted number	of participa	ants					
EA men	nbers								



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6.	PRESENTER RECOGNISED PROFESSIONAL										
	Please provide the names of the presenter/s conducting this seminar/workshop/clinic										
	Name	EA Official qualified?	Yes	No							
	Name	EA Official qualified?	Yes	No							
	Name	EA Official qualified?	Yes	No							
7.	FUNDING AMOUNT Please note the maximum allocation of \$750 per application applies.										
	\$										
8	Please outline how this clinic wi	ill directly benefit the development	of EA Of	ficials							
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PLEASE SUBMIT ALL REQUESTED SUPPORTING DOCUMENTATION AS LISTED IN THE PROGRAM TERMS AND CONDITIONS. INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. PLEASE SUBMIT ALL APPLICATIONS AND SUPPORTING DOCUMENTATION TO:

Sports Development Officer
Equestrian Queensland
P.O Box 1358 D.C Coorparoo QLD 4151ncas@equestrianqld.com.au