

Date of Application:

Individual/Organisation's name:

Name of person requesting funds:

Contact phone:

Street address:

Individual/Organisation's activities:

Email address for notification purposes:

Amount requested (up to \$500.00 unless advised)

Reason (please outline briefly what the money will be used for and how this will be of benefit)

Thank you for completing our application form. Many organisations and people do a great job in the community and at FreshChoice we like to support them as much as possible. At the end of the month we will advise whether or not your application is successful. If you are not successful we will keep your application form for the next two months of FreshChoice Community Fund. If you are successful, we would like a photo and short news story to share with other FreshChoice customers. Photos and information can be presented directly to the FreshChoice Supermarket, emailed to the supermarket, or posted on our Facebook page (FreshChoiceNZ).

Please give this application form to a customer service instore.

