# 2020 CLUB DEVELOPMENT PROJECTS

#  FUNDING APPLICATION

|  |  |
| --- | --- |
| **Equestrian NSW affiliated Club Name** |  |
| **Project Name** |  |
| Name of person submitting this proposal |  |
| Contact email address |  |
| Contact telephone number |  |
| Funding amount requested (max $2,000) |  |
| Name of Project Manager |  |
| Contact email address |  |
| Contact telephone number |  |
| Project Start Date |  | Project Finish Date |  |
| **Detailed Project Description** |
| **Project Budget (Income and Expenditure) including funding from other sources** |
| **How will this project benefit Jumping?** |

**Please email this Funding Application to** **bruce@ensw.org.au** **by 10 Feb 20.**