GUMALA ABORIGINAL CORPORATION
2024-25 CULTURE PROGRAM
APPLICATION FORM

Section 1 – Personal Details

Member's Name: _____ **DOB:**_____

Address: _____

Phone: _____ **Email:** _____

REQUIRED

Language Group: ☐ Banjima ☐ Yinhawangka ☐ Nyiyaparli

Section 2 – Summary of Request

Please give a brief description of the type of assistance you require.

Location: _____

Date of travel: _____

Camping/Connecting to family/Country ☐

Story and song sharing ☐

Arts and activities ☐

Visiting gravesites, and family history and heritage ☐

Language, teaching or recording ☐

Hunting, gathering, fishing ☐

Lore and cultural activities ☐

Other: _____

_____

Section 3 – Goods / Services

As we can only pay directly to suppliers and we will need a breakdown of the goods/services requested and the associated costs. We cannot consider your request without this.

Description of Items:	Supplier:	Amount:
(e.g. camping supplies)	*(e.g. Hedland Camp Shop)*	
	Total:	

Signature: _____ **Date:** _____

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