



BANJIMA CHARITABLE TRUST 2024-25 HEALTHY LIVING PROJECT APPLICATION FORM



Eligibility: To be eligible for this assistance, you must be a registered Banjima or Daisy beneficiary.

Personal Details:

Member's Name: _____ DOB: _____

Address: _____

Phone: _____ Email: _____

Declaration: I declare that the information I have provided above is true, complete and accurate. I authorise Gumala Aboriginal Corporation (GAC) to speak to any interested parties about my application. GAC will not provide confidential or sensitive information to interested parties without explicit consent from myself. I understand that, in accordance with the Banjima Charitable Trust Deed, no cash payments or reimbursements can be made to me or any other Banjima/Daisy Beneficiary.

Goods / Services:

Description of Items:	Supplier:	Amount:
<i>(e.g. fridge and freezer)</i>	<i>(e.g. Tom's Hardware)</i>	
		Total:

Relationship Statement:

I acknowledge that I am requesting GAC to make a payment for goods or services that are not in my name, however I confirm that my relationship to this person means that payment of these goods or services will benefit me.

Member Code of Conduct:

Please note, Members who breach GAC's Member Code of Conduct Policy may face disciplinary action. A copy of GAC's code of Member Code of Conduct Policy can be found on the Gumala website at www.gumala.com.au

Program Exclusions:

Cash payments (including for rent, boarding and credit cards), accommodation (unless under special circumstance, supporting documents must be supplied), legal costs, fines/penalties/criminal-related costs, dirt bikes/boats/jet skis, alcohol and tobacco products, gambling, celebrated events (weddings/birthdays etc), weapons, tax debt.

Signature: _____

Date: _____