

\$500 MY PLACE IS ACE

APPLICATION FORM

Please note all projects are to take place in Port Macquarie-Hastings local Government area within three (3) months of receiving funding. Applicants agree to adhere to the project guidelines.

Your name _____

Group/Organisation (if applicable) _____

Address _____

Email _____

Mobile phone number _____

Project title _____

Location of proposed project _____

Proposed project date/s _____

1. Tell us a little about yourself / your group _____

2. Tell us about your awesome project idea _____

3. How will you use the money ? _____

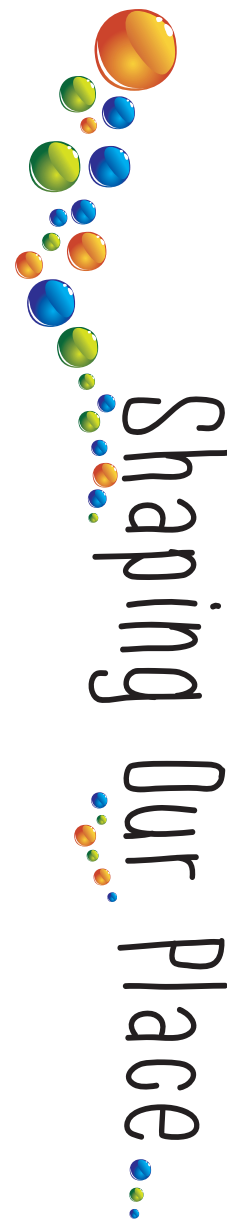
4. How did you find out about the \$500 My Place is Ace grant application?

- PMHC website Social media Facebook Events Fliers/Posters
 Word of mouth Saw a place making project Other _____

Applicants name _____

Signature: _____ Date: _____

Thank you for your application. Please return the completed form and any further documentation to any Port Macquarie-Hastings Council office, or post to PMHC Place Making Team PO Box 84, Port Macquarie NSW 2444 or email to: lucilla.marshall@pmhc.nsw.gov.au. Enquiries telephone 6581 8111.



PORT MACQUARIE
HASTINGS