**Athlete Funding Support Application Form**

The Western Australia Karate Federation (WAKF) Funding Support aims to provide financial assistance to meet the high costs of travel for athletes based in Western Australia.

Please refer to the WAKF Funding Support Policy for details, eligibility and requirements when filling out this form. The policy can be found on the WAKF Website. <https://karatewestaustralia.com/rules-regulations/>

Please submit this form to [info@karatewestaustralia.com](mailto:info@karatewestaustralia.com) before the commencement date of the competition you are seeking funding for.

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| **Applicant Details** | | | | | |
| Date of Application |  | | | | |
| Name of Athlete |  | | | | |
| Name of Parent/Guardian *(If the applicant is under the age 18 years old at the time of application.)* |  | | | | |
| Address |  | | | | |
| Contact Number |  | Email | |  | |
| Are you a current state team member? |  | Name of club you are a member of. | |  | |
| Bank Details  (*If successful, the funding will be transferred to this account)* | BSB | Account Number | | Account Name | |
| **Please fill in the following information regarding the opportunity you are seeking funding for.** | | | | | |
| Competition / Event Name |  | | | | |
| Date/s of Competition / Event |  | | Location of Competition | |  |
| Competition / Event Category |  | | | | |
| Estimated costs associated with attending the event |  | | | | |

I, (Full Name of athlete or parent/guardian if the athlete is under 18)      , agrees to the following:

* The requirements of the WAKF funding as per the WAKF Funding Support Policy; and
* To acquit the grant within three months of the my/athlete’s return from the competition / event.

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| Signature: |  | Date: |  |

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