

MAKE A GRANT APPLICATION FORM

Please fill in this form and fax back to 02 8353 3624

Name of Grantmaker:

Name of Organisation:

Address:

Suburb/Town:

State: Postcode:

Telephone: Fax:

Email:

Website Address:

Proposed Funding Amount:

Would you prefer to (please tick one):

EITHER Support the general operations of Documentary Australia Foundation?

OR Support one or more documentaries on DAF's Approved List of films?

Please enter the documentaries you would like to support:

Journey Beyond Road Trauma

Are you (or key members of your organisation) related to the filmmakers of your preferred documentary?

Yes No

If yes, how?

Please note: the Documentary Australia Foundation Board will not willingly approve proposed grants to documentaries of related party interests.