



Letter of Support Request for Grant Funding Application

Contact Details

District/Club	
Postal Address	
Contact Name	
Position Held	
Daytime Contact Number	
District/Club Email	

Grant Information

Name of Grant	
Grant Closing Date	
Funds to be used for	
Date letter of support required by	

Additional Comments

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Signature: _____ Dated: ____/____/____

Please complete the above and return to:
Bowls Queensland
PO Box 476
Alderley Qld 4034
Email: admin@bowlsqld.org or Fax: (07) 3855 0010

BQ Office Use Only

Actioned by:		Date Letter sent:	
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