



**OPPORTUNITY
SHOP**

Application for funding from Waikanae Baptist Op-Shop

Date of application.	
Name of person making application.	
Your contact email or phone number.	
Name of organisation/person you are requesting funds for.	
How much are you requesting and what are you requesting funds for?	
Contact details of organisation/person you are requesting funds for.	Postal address: Email address: Phone number:
As grants are paid by direct credit, please provide bank account name and number	

Please include any documents which will support your application (e.g. information on your organisation/the cause you are applying for). Please also include proof of the bank account details where grant is to be paid into and then hand into Waikanae Baptist Op-Shop, 8 Mahara Place, Waikanae or scan and email to opshop@waikanaebaptist.co.nz