



Guidance & Application for Grant Form 1

The primary purpose of the Finish Line Fund (FLF) Registered Charity 1179170 is provision of grants to runners and/or their families who have been affected by serious injury, disability or death whilst participating in the sport of running.

Assistance from the FLF may not be applicable for cases in need of long-term financial support. The FLF has the right to adjust or decline an applicant's request.

The FLF does not discriminate between applicants based upon race, religion, colour, gender, sexual orientation, age or disability.

Finish Line Fund Parameters

Funds can only be granted based on the merit of the application of the requestor to meet primary short-term needs for purposes consistent with the purposes of the FLF as stated in the charity constitution.

Funds can only be granted to a requestor or requestor's family one time.

Finish Line Fund Process

FLF Assistance Forms can be obtained *online via the website:*
www.finishlinefund.org

Completed forms will be reviewed by the Trustee Review Team. The Team will provide a final decision or make a request for additional information. Please allow **7 working days** to expire before inquiring about the status of the application.

At the discretion of the Trustee Review Team, documentation regarding income, personal bank statements and expenses may be requested. If the funds requested are for payment to a business/service provider, the Review Team may also request to speak directly to them or to seek quotations from other suppliers.

If approved, the funds will be distributed either to the requestor, or their family, or directly to the business/service provider.

Assistance Request Application

Personal Information

Last name:	First name:	
Address:		
Phone (Mobile):	(Work):	(Home):
Amount Requested:	Purpose of Request:	

What events lead to your grant application?

Please provide two References: name, home address, e-mail address and telephone numbers (References must not be a relative)

1. -----

2. -----

I authorise Finish Line Fund to verify all information provided and retain in its records for 6 years.

Signature:

Date:

Printed name:

For Office Use Only

Trustee's Initials: _____ Date Processed: _____ Approved / Not Approved

_____ Date Processed: _____ Approved / Not Approved

_____ Date Processed: _____ Approved / Not Approved

_____ Date Processed: _____ Approved / Not Approved