

## JFA Noske Christmas Fund 2022

### Guidance and application form

The JFA Noske Christmas Fund provides grants of \$150 to assist eligible adults living with disability to celebrate Christmas. The Fund was established in 2009 in honour of the late Mr Noske who set aside funds to spread the joy of Christmas. Grants are available to support personal costs associated with Christmas, including presents for loved ones, food for Christmas day, clothing, travel and more.

### To be eligible to apply you must:

- be 18 years of age or over and
- be a South Australian resident and
- live with physical disability, acquired brain injury or degenerative neurological disorder and
- receive, or be eligible for, a disability support pension or equivalent and
- give consent to disclose all details within your application to the Australian Executor Trustees, as the trustee of the Noske Estate.

There is a limited amount of funding available and we may not be able to fund all the applications we receive. If we receive more eligible applications than we can fund, we will select successful applications through a lottery. Please do not assume your application will be successful just because you meet the eligibility criteria, or because you have received a grant from us before. Please do not make any spending commitments until we have told you whether your application has been successful or not.

#### To apply, please complete and send this application form to:

Address: JFA Noske Christmas Fund, 104 Greenhill Road, Unley SA 5061

**Email:** grants@juliafarr.org.au

# APPLICATIONS MUST BE RECEIVED BY 5:00PM ON FRIDAY 30 SEPTEMBER 2022

We will contact you if we need any additional information, and to tell you our decision on your application. If you are awarded a grant, we will pay the funds by electronic transfer to your bank account.

Please note that the maximum grant is \$150 per person. We may award you less than \$150. Grants are allocated at the discretion of the Julia Farr Association and our decision is final.

## **JFA Noske Christmas Fund 2022**

## Application form

This form must be completed in full.

If you have any questions, please contact our office on (08) 8373 8333 or email <a href="mailto:grants@juliafarr.org,au">grants@juliafarr.org,au</a> before submitting your application.

# Your application

Application	n ID (JFA Office Use Only)								
Name			Date of Birth						
Email			Phone						
Address									
Suburb			State			Post Code			
Are you an adult living with a physical disability, acquired brain injury, or degenerative neurological disorder?							Yes	No	
Please provide details									
Do you receive, or are you eligible for, a Disability Support Pension or equivalent?  Yes								No	
If you receive an equivalent pension, please advise below what this is									
If you answ	vered Yes, please provide you								
What Christmas item/activity do you wish to apply for?									
How would this item/activity benefit you?									
	quested (up to \$150) available funds*								

## Your bank details

If your grant application is successful, we will pay the grant directly into your bank account.

Bank Detail	s										
Name that the account is held in				Bank Name							
BSB Number				Account Number							
If payment advise them	_		<b>stee Account</b> , plea	se pro	ovide Public Tru	stee contact details so that we can					
BSB Number				Accou	unt Number						
Account manager name											
Phone											
Email											
If payment is being made to an <b>Australian Executor Trustee Account (AET)</b> , please provide AET contact details so that we can advise them of payment:											
BSB Numbe	er			Accou	unt Number						
Account manager name											
Phone											
Email											
provide	us with		ils. Please note th	at if y	you don't tell u	orm, please contact our office and is your bank details have changed,					
<b>Declaration of Applicant and Appointed Guardian if appointed:</b> I consent to payment of funds in accordance with payment instructions provided in the above Bank Details. I declare the information provided in this application is true and correct and I will use the grants for the intended purpose. I consent to disclose all details within this application form to the Australian Executor Trustees as the trustee of the Noske Estate.											
Date			Applicant Signatu	ire							
Appointed Guardian signature (if applicable)											
Details of p	erson c	ompleting this form i	f not the applicant								
Name			Email								
Phone			Organisation/Add	ress							

Please return your completed application to:

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