

JFA Noske Christmas Fund 2023

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 29 SEPTEMBER 2023

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. We will inform you of our decision and pay your grant by Wednesday 13 December.

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.



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Application form

This form must be completed in full.

If you have any questions, please contact our office on (08) 8373 8333 or email grants@juliafarr.org,au before submitting your application.

Your application

Application 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?												
Please provide details												
Do you receive, or are you eligible for, a Disability Support Pension or equivalent?								No				
If you receive an equivalent pension, please advise below what this is												
If you answered Yes, please provide your CRN												
What Christmas item/activity do you wish to apply for?												
How would this item/activity benefit you?												
	quested (up to \$150) available funds*											
If you are a	Yes	No										



Your bank details

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

Bank Details										
Name that the account is held in				Bank Name						
BSB Number				Account Number						
If payment is being made to a Public Trustee Account , please provide Public Trustee contact details so that we can advise them of payment:										
BSB Number				Account Number						
Account manager name										
Phone										
Email										
If payment is being made to an Australian Executor Trustee Account (AET) , please provide AET contact details so that we can advise them of payment:										
BSB Number				Account Number						
Account mainame	nager									
Phone										
Email										
If you change your bank account details after submitting this application form, please contact our office and provide us with your new bank details. Please note that if you don't tell us your bank details have changed, we cannot ensure you will receive your grant in time for Christmas.										
Declaration of Applicant and Appointed Guardian if appointed: 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	ıre						
Appointed Guardian signature (if applicable)										
Details of person completing this form if not the applicant										
Name			Email							
Phone			Organisation/Add	Iress						

Please return your completed application to:

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