



APPLICATION TO FUNDRAISE			
The purpose of this form is to notify Council that the following people or group will be conducting a fundraiser where food is being sold or provided within the Far North District.			
Applicant Details			
Full name and address of the applicant (or organisation)			
Person or people in charge of providing the food for sale <i>(on the day)</i> .			
Home phone		Mobile phone	
Email			
Fundraiser Details			
Is this a one-off fundraiser? <i>(Please circle one)</i>	Yes	No	
Date of the fundraiser/s <i>(If more than one fundraiser please provide the dates of the fundraisers)</i>			
Location/s of the fundraiser/s <i>(Physical Address)</i>			
Reason for fundraiser			
What food is being sold? Please specify all food being sold <i>(If you have a menu please attached to this application)</i>			
Applicant's signature			
Application date			
For Office Use Only			
Date received		Date approved	
Authorised Officer		Reference number	

Please allow 15 working days for processing of this application