



# Happy Family Program 2019 Application Form (NSW)

Cystic Fibrosis Community Care's Happy Family Program supports CF Community Care members in NSW, who have a child under 18 years old who has cystic fibrosis (CF) or adult members who have CF, to have a day out or escape for a weekend away with their family.

You may be eligible to receive one of a limited number of grants of up to \$500 to use so your family can spend quality time together. Please read the details on page 2 for the terms and conditions and how to apply.

**Applications for 2019 will close Monday 2 December 2019 (or earlier if all grants have been distributed)**

## Your details

Name of person with CF:		CF Clinic:
Name of Parent / Guardian (if person with CF is a child)		
Email:		Phone:
Address:		
Suburb / Town:	State:	Postcode:

## Request details

What would this grant be used for? ..... ..... .....		
Proposed date of break / activity:	Full cost of break / activity:	Amount requested: <i>(up to \$500)</i>
<input type="checkbox"/> I acknowledge that I will provide proof of expenditure within four weeks of my break/activity if my application is successful		
My bank account details for direct deposit / bank transfer:		
Name of Bank:	Account name:	
BSB:	Account number	

## Sharing your story

Are you prepared to provide photos, comments and / or a written story or testimonial for use by CF Community Care in newsletters and reporting to funding bodies? (The answer to this question will not affect your chance of receiving the grant).

- Yes - Please tick all the ways you are willing to provide information:  No
- Photos     Comments     Written story

## Privacy and consent

I agree to the collection of the data on this form by CF Community Care and acknowledge that all personal information provided on this form will be placed on CF Community Care's database and used for purposes associated with its service and business operations / events. It will not be provided to any other person or organisation, without my prior consent, unless required by law. The CF Community Care privacy policy provides information on how to access your personal information held by CF Community Care and how to seek correction of such information if required. The privacy policy also contains information about how to make a complaint about any breach of privacy legislation. For further details of CF Community Care's privacy policy view the policy online at [www.cfcc.org.au](http://www.cfcc.org.au)

CF Community Care welcomes feedback. You can provide feedback online at [www.cfcc.org.au](http://www.cfcc.org.au) or by contacting CF Community Care

## How to apply

1. Complete all sections of the Happy Family Program application form
2. Send it to Programs and Support Services, CF Community Care via:  
E: [nswsupport1@cfcc.org.au](mailto:nswsupport1@cfcc.org.au)  
M: PO Box 4113, Homebush South NSW 2140
3. We will contact you about your application within five business days of receiving it

## Terms and conditions

You must:

- Be a 2019 member of CF Community Care
- Be a resident of NSW
- Have CF or be the primary parent / carer of a child aged under 18 years who has CF
- Have not received a Happy Family Grant in 2018 (grants are limited to one per family every 2 years)

The grant must be used towards a day out or weekend away for the family in 2019

- e.g. Entry to an adventure park, the zoo, or the museum; tickets to the movies, a sporting event, a show; or accommodation

A completed application form must be provided

If successful, you will be required to provide proof of expenses within four weeks of your break / activity

- Failure to provide proof of expenses will make you ineligible for future Happy Family grants

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## Need more information?

If you have any questions or would like more information about the Happy Family Program or any of CF Community Care's other services, contact us on:

W: [www.cfcc.org.au](http://www.cfcc.org.au)

E: [nswsupport1@cfcc.org.au](mailto:nswsupport1@cfcc.org.au)

P: (02) 8732 5700

M: PO Box 4113, Homebush South NSW 2140

Office use only			
Date received:	Application successful: <input type="checkbox"/> Yes <input type="checkbox"/> No, why .....		
Amount approved:	Approved by:	Date approved:	Applicant notified:
Receipts due by:	Date receipts received:	Account & job code:	