Official GAA Charity

2020 Application Form

As the country’s leading 32-county sporting/community organisation, each year the GAA receives a large volume of requests to work in partnership with charities and other worthy causes.

To maximise our potential as a supporting partner, the Association now selects each year five official charities. Each chosen charity receives a €20,000 donation. In recent years, the work of the official GAA charities has also been highlighted on national match days such as the GAA’s annual health-themed All Ireland semi-final in Croke Park in August.

Any good partnership depends on shared understanding, values, and goals. This official GAA charity application form is designed to assist us in better understanding why a charity is seeking to partner with the Association and what values and goals we share. It also seeks to ascertain basic information about how a partnership might benefit the charity’s target audience and the GAA membership, while also offering an opportunity to highlight how you see the Association supporting your activities, and vice versa.

Shortlisted candidates will be asked to provide the GAA with a copy of their audited accounts from the previous year. Successful charities are announced in the weeks following GAA Annual Congress, which is usually held the last weekend of February each year.

Please return your completed application form to [teresa.rehill@gaa.ie](mailto:teresa.rehill@gaa.ie) no later than close of business on 31st January 2020.

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| **Name of Organisation** *(This should be your official or Registered charity name)* | |  | | | | | | | | | | | | |
| **Address of Organisation** *(This should not contain the personal name or address of an individual e.g. secretary)* | |  | | | | | | | | | | | | |
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| **Telephone Number** | | | **Fax Number** | | | | **Contact e-mail** | | | | | | **Website** | |
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| **Organisation Officer Contact Details** | | | | | | | | | | | | | | |
| **Officer** | | | **Name** | | | | | | **Address (If different to org. address above)** | | | | | |
| **Chief Officer / Director or appropriate senior official** | | |  | | | | | |  | | | | | |
| **Chairperson** | | |  | | | | | |  | | | | | |
| **Secretary of Board** | | |  | | | | | |  | | | | | |
| **Treasurer** | | |  | | | | | |  | | | | | |
| **Main Contact Details** *(Person who has overall responsibility for this application and key contact person with the GAA if application is successful)* | | |  | | | | | | |  | | | |
| **Telephone No.** | | |  | | | | | | | **Email** | |  | |
| **Status /Structure of Organisation** | | | | | | | | | | | | | | |
|  | **Yes** | | | **No** | **Tick Yes / No as Appropriate** | | | | | | | | | |
| **Is your Organisation a registered Charity?** |  | | |  | **If Yes please provide Charity Number >** | | | | | |  | | | |
| **Is your Organisation a registered Company?** |  | | |  | **If Yes please provide Company Number >** | | | | | |  | | | |
| **Is your Organisation a voluntary or community “*Not for Profit*” organisation?** |  | | |  | **If No please describe your organisation >** | | | | | |  | | | |
| **Provide details of your organisation’s aims & objectives** | | | | | | | | | | | | | | |
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| **In no more than 250 words, please outline why you are seeking a partnership with the GAA. Include details such as:**   * **How you might use a donation of €20,000 to advance your work?** * **How you would intend activating the partnership – how could the GAA assist you?** * **How might the partnership benefit GAA members?** | | | | | | | | | | | | | | |
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| **Please indicate the Geographical / Catchment area covered by your work.** | | | | | | | | | | | | | | |
|  | | | | | | **Tick** | | **Provide details of area covered if relevant** | | | | | | |
| 32 county coverage (whole of Ireland) | | | | | |  | |  | | | | | | |
| 26 county coverage (Republic of Ireland) | | | | | |  | |  | | | | | | |
| 6 county coverage (Northern Ireland) | | | | | |  | |  | | | | | | |
| Regional Area | | | | | |  | |  | | | | | | |
| Local Area | | | | | |  | |  | | | | | | |