

Sponsorship Program Application Form

INFORMATION ABOUT THE PROGRAM

The Sponsorship Program provides funding up to \$1,000 to support community events and programs or up to \$500 for minor works that Council recognises as having significant economic and social benefit to the Wollondilly Community and the Wollondilly Local Government Area.

Sponsorships are provided twice per year in May and October.

ELIGIBILITY

To be eligible for funding an organisation must:

- Be not for profit
- Be an incorporated body or be auspiced (sponsored) by an incorporated body
- Offer an annual event or project in the Wollondilly LGA, and
- Have no outstanding debts to Council

Applicants must demonstrate linkages to the Community Strategic Plan Outcomes and Strategies

Applicants must ensure Council receives appropriate recognition for its sponsorship contribution

APPLICATIONS

An eligible group must apply in writing annually using this application form.

The sponsorship program is considered by Council twice each year.

Applications open on 1 May must be submitted by 31 May and open on 1 September and submitted by 31 September each year for consideration of a funding allocation

Only one application per group or organisation will be considered for funding each year

Requests for recurrent funding will not be considered

Applications for minor works must attach plans / quotes (where relevant)

Successful applicants must lodge a recipient created tax invoice for payment

Applicants must demonstrate benefit to Council for its sponsorship

GRANT CATEGORIES

□ Minor Works

Maximum of \$500

□ Community Event Maximum of \$1,000

ACQUITTAL

Successful applicants shall undertake an acquittal process each year and provide Council with:

- Information on how the sponsorship was spent
- Evaluation of how the event / program went
- Details of completed minor works
- Membership / Participation rates
- Copies of any promotional material and media coverage
- Details of Council's acknowledgement

INSTRUCTIONS

You must submit this Application electronically by completing the application online and sending it to Council by email to: council@wollondilly.nsw.gov.au

Contact Council's Community Project Officer for any assistance in completing your application on 4677 9611 or <u>rob.moran@wollondilly.nsw.gov.au</u>

APPLICANT DETAILS

Please provide the following details:

APPLICANT DETAILS	
Organisation Name	
Street Address	
Postal Address	
Australian Business Number (ABN)	
Is your organisation registered for GST?	□ Yes □ No

Does your organisation hold current Public Liability Insurance?	 □ Yes – please attach copy □ No
	1
Contact Name	
Phone	(02)
Mobile	
Fax	(02)
Email	
Bank Account Details	
Account Name:	
BSB:	
Account Number:	
Bank Name:	

SPONSORSHIP SPECIFICATIONS

Please complete the following

DETAILS OF EVENT / PROGRAM	
Name of event / program / minor works	

Purpose of Sponsorship	
Linkage to Council's Community Strategic Plan - tick one box only	 Looking after the Community Caring for the Environment Building a stronger economy Management and provision of Infrastructure
How will your application address the strategies of the Community Strategic Plan? - tick appropriate boxes	 Access to a range of activities services and facilities A connected and supported community Our local environment that is valued and supported A community that interacts with and cares for their environment A strong local economy providing employment and other opportunities Safe, maintained and effective infrastructure Access to a range of transport option
How will this event / program / minor works provide a direct benefit to the Wollondilly Shire	
Key Date/s	Proposed start date: Anticipated end date: Event Date:

PREVIOUS FUNDING

If you have sought funds from other sources for this event / program, please complete the following:

Funding Body	Amount Requested	Amount Received

BUDGET BREAKDOWN

Please provide details of the total cost of the event / program

Materials / Equipment	\$
Labour	\$
Other	\$
Total cost of event / program	\$
TOTAL SPONSORSHIP SOUGHT FROM COUNCIL	\$

DECLARATION

I have read and understood the information on the Wollondilly Annual Financial Assistance Program, including the eligibility criteria and to my best of my knowledge, the information provided in this application is true and correct

NAME:	

SIGNATURE:	
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DATE: _____

SUBMTTING YOUR APPPLICATION

Please save this form to your computer and e-mail it to: council@wollondilly.nsw.gov.au

Office Use Only	
Date Received	
Application Number	