

Small Events Sponsorship Application Form 2020-2021

Form Preview

ELIGIBILITY

* indicates a required field

Important Information

Before applying, please:

- Preview the Application Form, so you can gather all information needed;
- Contact the Community Development area on **(08) 9411 3444** during business hours or email **commdev@cockburn.wa.gov.au** to determine your eligibility, ensure you are applying under the correct category, and to answer any questions.

Incomplete applications will not be considered.

The following sections MUST be completed by the Applicant Organisation. This page of the form is designed to help you, and us, understand if you are eligible for Small Event Sponsorship funding. It's crucial that you complete these questions before any others to ensure you do not waste your time applying for unsuitable funding.

Community Development Contact

Did you contact a City of Cockburn Community Development Officer to discuss your potential application? *

☐ YES ☐ NO

Name of Community Development Officer *

Date of contact *

Method of contact *

☐ Phone ☐ Email ☐ In person ☐ Other:

Eligibility Questions

Is your organisation a not-for-profit entity? *

☐ YES ☐ NO

If NO, you are not eligible for Small Events Sponsorship. Check here: is your organisation not-for-profit?

Is your organisation an incorporated legal entity OR are you being auspiced by an incorporated organisation? *

☐ YES ☐ NO

If YES, you must supply a copy of the organisation's Certificate of Incorporation (if you haven't previously done so). If NO, you are not eligible for Small Events Sponsorship. You may only apply for

Small Events Sponsorship Application Form 2020-2021

Form Preview

funding through an organisation or auspicing body that is an incorporated, not-for-profit organisation. The auspicing body receives funding on behalf of the applicant organisation, and is ultimately responsible for ensuring the funded event is completed and the funding is acquitted.

Is your organisation based in the City of Cockburn OR primarily providing services in the City of Cockburn, AND looking to hold an event in Cockburn that will benefit the Cockburn community? *

☐ YES ☐ NO

If NO, you are not eligible for Small Events Sponsorship.

Is your organisation or auspicing organisation financially viable? *

☐ YES ☐ NO

Applicants must provide a recent bank statement from within the last two months.

Does your organisation have the capacity to undertake all the required planning, bookings, permits and approvals processes, marketing and promotion to ensure the success of your event? *

☐ YES ☐ NO

Please review the City of Cockburn Guide to Community Events for additional information and assistance.

Does your organisation have appropriate insurance for this event? *

☐ YES ☐ NO ☐ Not applicable

For example: volunteers, public liability.

If your organisation is a school, P&C or P&F association, you must satisfy the following additional criteria:

- There is an identified community need for the event.
- The event is accessible to the wider Cockburn community outside of school hours.
- You are able to provide at least 50% or more either as an in-kind or financial contribution to the event.

If your organisation is a school, P&C or P&F association, can you satisfy all of the above additional criteria? *

☐ YES ☐ NO ☐ Not applicable

If NO, you are not eligible for Small Events Sponsorship.

If you answered NO to any of the above Eligibility Questions, you may not be eligible for funding and should contact the Community Development area on (08) 9411 3444 before proceeding with this application.

Previous Funding

Has your organisation previously received funding from the City of Cockburn? *

☐ YES, this financial year ☐ YES, in previous years ☐ NO

If you have received funding in this financial year, contact the Community Development area on (08) 9411 3444 to confirm your eligibility before proceeding with this application.

If you have received previous funding from the City of Cockburn, please provide details of your most recent successful application

Please include approximate date, category of funding, project title and amount.

Small Events Sponsorship Application Form 2020-2021

Form Preview

Does your organisation have any outstanding City of Cockburn acquittal reports?

*

☐ YES

☐ NO

☐ Not applicable

Applicants that have been successful previously are eligible to apply provided all previous funding has been satisfactorily acquitted. Acquitted means you have provided a detailed report of how the funding was used, including providing receipts and evidence such as photos or media, using the appropriate Acquittal Form.

APPLICANT DETAILS

* indicates a required field

Applicant Organisation Details

Applicant organisation name *

Organisation Name

Describe your organisation and its purpose *

Word count:

Must be no more than 200 words.

Street Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia

Postal Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Organisation phone number *

Must be an Australian phone number.
Must include area code.

Organisation primary email *

Must be an email address.

Organisation website

Small Events Sponsorship Application Form 2020-2021

Form Preview

Must be a valid URL

Applicant Organisation Contact Person

Contact name *

Title

First Name

Last Name

Position held in organisation ***Contact phone number ***

Must be an Australian phone number.
Must include area code.

Contact email *

Must be an email address.
This is the address we will use to correspond with you about this application.

Is your organisation incorporated? *☐ YES☐ NO

If NO, you must fill out the Auspice Organisation Details.

Does your organisation have an ABN? (Australian Business Number) *☐ YES☐ NO

If you do not have an ABN, please complete and submit a Statement by a Supplier Form with your application; if this form is not submitted, the Australian Taxation Office will require 48.5% of an approved grant to be withheld. Download the form [here](#).

Please upload your organisation's Certificate of Incorporation *

Attach a file:

Max 25mb

Applicant Organisation ABN *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register
ABN

Small Events Sponsorship Application Form 2020-2021

Form Preview

Entity name
ABN status
Entity type
Goods & Services Tax (GST)
DGR Endorsed
ATO Charity Type More information
ACNC Registration
Tax Concessions
Main business location

Must be an ABN.

Please upload your completed Statement by a Supplier Form *

Attach a file:

Max 25mb

AUSPICE DETAILS

* indicates a required field

Auspice Organisation Details

Auspice organisation name *

Organisation Name

Street Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia

Postal Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia

Organisation phone number *

Must be an Australian phone number.

Small Events Sponsorship Application Form 2020-2021

Form Preview

Must include area code.

Organisation primary email *

Must be an email address.

Organisation website

Must be a valid URL.

Auspice Organisation Contact Person

Contact name *

Title First Name Last Name

Position held in organisation *

Contact phone number *

Must be an Australian phone number.
Must include area code.

Contact email *

Must be an email address.

Is your organisation incorporated? *

☐ YES ☐ NO

If NO, you are not eligible to auspice this application.

Does your organisation have an ABN? (Australian Business Number) *

☐ YES ☐ NO

If you do not have an ABN, please complete and submit a Statement by a Supplier Form with your application; if this form is not submitted, the Australian Taxation Office will require 48.5% of an approved grant to be withheld. Download the form [here](#).

Please upload the Auspice Organisation's Certificate of Incorporation *

Attach a file:

Max 25mb

Please attach a letter signed by the Auspice Organisation office bearer verifying the auspice arrangement *

Attach a file:

Small Events Sponsorship Application Form 2020-2021

Form Preview

Must be the President, Chair, CEO, Secretary or Treasurer. Letter must include name, position, signature and date, and confirm the arrangement is valid and current. Max 25mb

Auspice Organisation ABN *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN

Please upload your completed Statement by a Supplier Form *

Attach a file:

Max 25mb

EVENT DETAILS

* indicates a required field

Event Title *

Timing and Location

Event Date *

Funding will not be provided retrospectively for events that have already occurred, or due to occur within two months of lodging this application.

Small Events Sponsorship Application Form 2020-2021

Form Preview

Where will the event take place? *

Please detail all locations if being held at multiple venues.

Has the venue(s) been confirmed?

☐ YES

☐ NO

☐ Not applicable

Project Details and Benefits

Event description (What are you planning?) *

Word count:

Must be no more than 200 words.

Describe your proposed event and what you aim to achieve.

Event rationale (Why are you doing it?) *

Word count:

Must be no more than 200 words.

Describe the issue or needs that your event will address.

Please indicate which theme/s your project meets from the City's Strategic Community Plan *

- ☐ Local economy – a sustainable and diverse local economy that attracts increased investment and provides local employment
- ☐ Environmental Responsibility – a leader in environmental management that enhances and sustainably manages our local natural areas and resources
- ☐ Community, Lifestyle and Security – a vibrant, healthy, safe, inclusive and connected community
- ☐ City Growth and Moving Around – a growing City that is easy to move around and provides great places to live
- ☐ Listening and Leading – a community focused, sustainable, accountable and progressive organisation

For more information or a further breakdown of the themes into objectives, please refer to the City of Cockburn Strategic Community Plan

What are the planned activities? How will you achieve the event aims? (What? How?) *

Word count:

Must be no more than 200 words.

Describe your event planning, list the specific activities that will take place to carry out your event and meet your aims.

Who will benefit from the event? (Who? How many?) *

Small Events Sponsorship Application Form 2020-2021

Form Preview

Word count:

Must be no more than 200 words.

Describe how the Cockburn community will benefit.

Community Support

List the organisations and Cockburn community members that support your event

*

Word count:

Must be no more than 100 words.

Letters of support or referees

Attach a file:

Letters of support will strongly assist your application. They are written by another organisation or individuals telling of the positive impact of your organisation, and how or why they support you and/or this event. They must be printed on the supporter's letterhead and be signed by the Chair, President or CEO. Max 25mb

Promotion and Acknowledgement

How will your event be promoted? How will you encourage attendance? *

Word count:

Must be no more than 150 words.

Describe types of media or other means to be used, and ways the event will be promoted and participants reached.

How will the City of Cockburn's support be recognised? *

Word count:

Must be no more than 150 words.

Describe the ways support received will be acknowledged.

BUDGET AND FINANCIAL DETAILS

* indicates a required field

Financial Details

Total event cost *

Small Events Sponsorship Application Form 2020-2021

Form Preview

\$

What is the total budgeted cost of your event?

Sponsorship amount requested *

\$

What is the total financial support you are requesting from the City of Cockburn in this application?
Max. \$3,000.

Please note:

Requests for Small Events Sponsorship are to a **maximum of \$3,000**.

Applicants who are able to contribute toward the event in cash or in-kind will be considered favourably.

There are also funding caps for Christmas Carols or equivalent annual community events to a maximum of \$3,000, which also applies under the Community Grants category.

Budget Information

Outline your event budget including details of other funding that has been confirmed and/or applied for. Clear item descriptions must be given (e.g. equipment hire, venue hire, advertising, etc.)

The budget **MUST** balance (**TOTAL INCOME = TOTAL EXPENDITURE**).

All figures are GST exclusive.

Please note:

1) INCOME must include:

- all fees being charged for the event.
- all funding received or pledged. Please note: schools, P&C and P&F associations must contribute at least 50% or more of the financial contribution to the event.
- in-kind contributions. These are donations of goods/materials and services that have a value; these may include a venue, materials donated and volunteer staff time. Please calculate volunteer labour at \$25/hour.

2) EXPENDITURE must include:

- purchase of non-consumable and consumable items
- equipment or venue hire
- advertising
- in-kind expenses (for goods, materials and services). Please calculate volunteer labour at \$25/hour.

3) DO NOT add commas to figures, e.g. write \$1000 not as \$1,000 to ensure figures in the table total correctly.

4) Funds will not be provided for consumables or personal items unless the applicant can demonstrate that the general community will benefit from their provision, though may be included as part of your event budget if they are funded by other sources of income. E.g. Catering is not eligible for funding however would be included in your total budget.

5) Two quotes must be provided for each expense (except in-kind) greater than \$500. Quotes must include the supplier's name, address, phone number and ABN, and indicate whether GST is applicable.

Small Events Sponsorship Application Form 2020-2021

Form Preview

6) Confirmed funding means approval has been given and you can provide written proof upon request that the allocated funding or in-kind contribution has been guaranteed.

7) Here is a [sample budget](#) to view.

Income

Income Description	Confirmed funding?	Income Amount (\$)	Comments
City of Cockburn Sponsorship	Yes No Estimated In-Kind	\$	
	Yes No Estimated In-Kind		
	Yes No Estimated In-Kind		
	Yes No Estimated In-Kind		
	Yes No Estimated In-Kind		
	Yes No Estimated In-Kind		
	Yes No Estimated In-Kind		
	Yes No Estimated In-Kind		

Expenditure

Expenditure Description	Expenditure Amount (\$)	Calculations
		NB: Items/services over \$500 require two quotes to be provided with grant application.
	\$	

Small Events Sponsorship Application Form 2020-2021

Form Preview

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Budget Totals

Total Income Amount

\$

This number/amount is calculated.

Total Expenditure Amount

\$

This number/amount is calculated.

Do your budget totals balance i.e. does the Income Amount total equal the Expenditure Amount total? *

☐ YES ☐ NO

If NO, please review your budget table before submitting.

Expenses

Did you have any expenses listed in your budget that cost over \$500? *

☐ YES ☐ NO

For any expenses over \$500 you will be directed to attach two written quotes for each item.

Quotes

Please upload two (2) written quotes for all expenditure (cost) items over \$500 *

Attach a file:

Max 25mb per file attachment. Recommended no more than 5mb per attachment.

Attachments

Please upload a bank statement for your organisation (preferably less than two months' old) *

Attach a file:

Max 25mb

If applicable, please upload proof of other financial contributions (e.g. letters of offer or confirmation from other funding contributors)

Attach a file:

Max 25mb

If applicable to your event, please upload Public Liability Certificate of Currency

Attach a file:

Max 25mb

Small Events Sponsorship Application Form 2020-2021

Form Preview

Bank Account Details

If your application is successful, funds will be provided via electronic funds transfer (EFT), and we will require the following information.

Incorporated organisation name *

Organisation Name

Name of bank or financial institution *

Branch location *

Account name *

Branch code/BSB number *

Account number *

CERTIFICATION AND SUBMISSION

* indicates a required field

This MUST be completed by an appropriately authorised person (e.g. office bearer such as Chair, President, CEO or authorised officer) on behalf of the applicant organisation, and, if applicable, the auspice organisation. This person may be different to the contact person listed earlier in the application.

Certification

- I am authorised by my organisation to complete and submit this application form.
- I certify that to the best of my knowledge all of the information supplied in this application and attachments is true and correct.
- I will notify the City of Cockburn of any change to the information supplied and any other information or circumstances arising that may affect this application.
- I understand that this is an application only and may not necessarily result in funding approval.

Small Events Sponsorship Application Form 2020-2021

Form Preview

- I give permission for the City of Cockburn to contact any person or organisation required during the assessment of the application and understand that information may be provided to other agencies, as appropriate.
- I understand that any decision made by the City of Cockburn is final and is not subject to an appeals process.

I understand that if the City of Cockburn approves funding:

- I will be bound by the contents of this application to carry out the event as described in this application, which will form part of the contractual agreement with the Council.
- I will be required to accept the conditions of funding in accordance with Council requirements.
- I will be required to comply with the City's [Wastewise Event Policy](#) and complete a [Accessible Events Checklist](#) in relation to the funded project.

If successful:

- All necessary permits and approvals will be obtained prior to the beginning of the event.
- The event will be covered by appropriate insurance.
- All relevant health and safety standards will be met.
- Council does not accept any liability or responsibility for the event.
- I will ensure that acquittal requirements are met within 30 days of the nominated event completion date.

Please fill in your details below as your endorsement of this application and the statements above.

I have read and agree to the above certification statements *

☐ Yes

Authorised Person Name *

Title First Name Last Name

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Position *

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Phone Number *

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Must be an Australian phone number.
Must include area code.

Date *

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Certification by Auspice Organisation

I have read and agree to the above certification statements *

☐ Yes

Small Events Sponsorship Application Form 2020-2021

Form Preview

Authorised Person Name *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Position *

Phone Number *

Must be an Australian phone number.
Must include area code.

Date *

Privacy Notice

The City of Cockburn will use any information provided for the purpose of processing your application and for remaining in contact with you.

Please note the information provided in your application and any related documentation/discussions may be provided to members of the assessment panel in order to assist the City of Cockburn in processing your application.

By submitting an application you consent to the City of Cockburn publishing the applicant's name, project description and amount funded in promotional material used for promoting the Cockburn Community Fund.

The City of Cockburn values the privacy of its customers and stakeholders. Please [click here](#) for further information on our privacy statement.

Feedback

You are now coming to the end of the application process. Before you **REVIEW** and click the **SUBMIT** button please take a minute to provide some feedback. This will help us to continually improve the funding application process for our customers.

Please indicate how you found the online application process

- ☐ Very easy ☐ Easy ☐ Neither ☐ Difficult ☐ Very difficult

How many minutes did it take you to complete this application?

Please estimate in minutes e.g. 1 hour = 60 minutes

Please suggest any improvements we should consider

Word count:

Small Events Sponsorship Application Form 2020-2021

Form Preview

Must be no more than 100 words.

Thank you for your application and your feedback.