

# Hawkesbury City Council



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## community sponsorship program

### application form

Please return this form to the above address

Enquiries: Patricia Sundin (02) 4560 4576 or  
psundin@hawkesbury.nsw.gov.au

#### Office Use Only

Approval Granted:	
Transfer of Funds:	
Job Number:	
Date Approved:	

Please read the information sheet "Hawkesbury City Council Community Sponsorship Program" before completing this form.

#### Name of Organisation / Group / Individual

#### Postal Address

  

#### Sponsorship Type (please refer to information sheet)

- |   |   |
|---|---|
| <input type="checkbox"/> 3 Year Event Sponsorship                           | <input type="checkbox"/> Access to Community Facilities |
| <input type="checkbox"/> Program & Activity Seeding Grant                   | <input type="checkbox"/> Minor Assistance               |
| <input type="checkbox"/> Improvements to Council Owned Community Facilities |   |

#### Organisation Type

- |   |   |
|---|---|
| <input type="checkbox"/> Individual                         | <input type="checkbox"/> Incorporated Association |
| <input type="checkbox"/> Registered Charity or Co-Operative | <input type="checkbox"/> Company                  |
| <input type="checkbox"/> Other (please specify)             | <input type="text"/>                              |

#### Locality

**Individual** Do you reside within the City of Hawkesbury?  Yes  No

**Organisation** Is your organisation based in the City of Hawkesbury?  Yes  No

#### PART B - PROJECT OUTLINE

Briefly describe the event, project or proposal for which you are seeking funds.

#### All Applicants



## PART B (cont.) PROJECT OUTLINE

(Please complete the relevant sections depending on the type of grant you are applying for).

### Event Sponsorship or Program and Activity Seeding Grant

What are the objectives of your event or project?


How will your project or event benefit the Hawkesbury community?


Which agreed community priority - as identified in Council's Social, Cultural or other community plan - is your project or event targeting (Please specify).


How will you evaluate the success of your project or event?


Income	\$	Expenses	\$
Earned Income <small>(from entry fees or sales etc)</small>		Salaries <small>(including volunteer costs)</small>	
Donations <small>(value of gifts or other sponsorship)</small>		Promotion, marketing and Advertising	
Grants <small>(from other government agencies)</small>		Materials and Program costs	
Other Income <small>(sundry income)</small>		Venue, equipment or transport hire	
Contribution <small>(from your organisation)</small>		Childcare	
Amount requested from Council		Other costs	
<b>Total Income</b>		<b>Total Expenses</b>	

### Access to Community Facilities

Facility to be hired

Will you be charging a fee for people to participate in the activity or event?  Yes  No

How many people will be attending the activity or event?



## PART B (cont.) PROJECT OUTLINE

Why do you need financial assistance to hire this facility?


Cost of Hire of Facility (attach quote)

Amount requested as contribution

### Minor Assistance Donation

Name of Competition or Event

Location of Competition or Event

Date of Competition or Event

Type of Competition / Event (Please tick)    Cultural    Sporting    Academic    Other

Level of Competition / Event (Please tick)    State    National    International    Other

### All Applicants

Does your organisation or club receive grants or sponsorship from another body?    Yes    No

If Yes, please provide details (who funds you and how much do you receive)


Has your organisation or club applied to other bodies for sponsorship for your activity, project or proposal?    Yes    No

If Yes, please provide details (who funds you and how much do you receive)


## PART C - CONTACT DETAILS

### All Applicants

Contact Name

Organisation

Position

Email

Contact Number



## PART D - ATTACHMENTS

(Have you attached the requested documents for the type of grant you are applying for?)

### Event Sponsorship

A copy of your organisations most recent audited financial statements?  Yes

A copy of your current public liability insurance?  Yes

### Program and Activity Seeding Grant

A copy of your current liability insurance?  Yes

### Access to Community Facilities

A copy of your current public liability insurance?  Yes

A quote for the cost of hiring the community facility?  Yes

### Minor Assistance Donation

Letter from your coach or organisers of competition confirming that you have been selected?  Yes

### Improvements to Council Owned Community Facilities

A copy of your receipt from Council for payment of all relevant Development Application fees?  Yes

## PART E - CERTIFICATION

I certify that, to the best of my knowledge, the statements made in this application are true.

### If you are an individual:

Applicants Name

Applicants Signature  Date

### If you are applying on behalf of an organisation:

Chairpersons Name

Chairpersons Signature  Date

### Privacy Notice

Council is bound by the provisions of the Privacy and Personal Information Protection Act 1998, in the collection, storage and utilisation of personal information provided in this form. Accordingly, the personal information will only be utilised for the purposes for which it has been obtained and may be available for public access and/or disclosure under various NSW Government legislation.