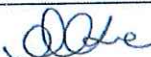




## George Town Council Area EVENT APPLICATION FORM

Applicant Organisation Name Lennies Legends – Relay for Life team	
A.B.N	(If applicable)
Address 54 Main road, George Town	
Contact Name (Event Coordinator) Simone Lowe	
Contact numbers (A) 63123019 or (B) 0400030372	
Name of Event Lennies Legends Trivia Night	
Proposed Location of Event Memorial Hall George Town	
Dates/Daily Schedules for events 21 <sup>st</sup> June 2014	
Brief Description of Event A fundraising Trivia Night and silent auction. All proceeds will be donated to Cancer Council through Lennies Legends Relay for Life Team	
How many people will attend the event? 80approx	Will the event patrons be <input checked="" type="checkbox"/> Older Adults <input type="checkbox"/> Younger Adults (18-30) <input type="checkbox"/> Children <input type="checkbox"/> Families
Will vehicles be involved? Eg. support vehicles? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If <b>Yes</b> , how many?	Will road closures be required? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Will alcohol be a) available for sale; <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No b) available for consumption (either BYO or provided by event organisers) <input type="checkbox"/> Yes <input type="checkbox"/> No	Will food be sold at the event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Food will be provided as part of entry fee.
Will there be music and/or entertainment? No	Will there be temporary structures (marquees, tents, etc.) in use?    No
Applicant name Simone Lowe	Position Fundraising member
Signature  (printed form only)	Date 03.06.2014

You may complete this form online and return to [info@georgetown.tas.gov.au](mailto:info@georgetown.tas.gov.au) or print, complete and return to George Town Council, PO Box 161, George Town, Tas, 7253

**Please note:**

Additional information regarding your event can be attached on another sheet of paper.

Events held on council property can not proceed without a certificate of currency for Public Liability Insurance.

**Please note that Council Approval can take up to six weeks.**

The information that Council is collecting from you is personal information required under the *Personal Information Act 2004*. The intended recipients of the information are officers of the George Town Council in order to carry out Council business. Personal information will be used only for the purpose described in the Act, or may be disclosed if authorised by law. The supply of the information by you is not voluntary. If you cannot provide or do not wish to provide the information sought, George Town Council will not be able to process your application. You may make application to access or amend the information held by Council by contacting the relevant Council Officer on 6382 8800.

**Schedule 1**

**George Town Council**

**Community Grants Application Form**

**Dated:**



**SECTION A: TO BE COMPLETED BY ALL APPLICANTS**

**APPLICANT DETAILS**

Name of Organisation/Group   
Street Address   
Postal Address   
Suburb  Postcode

**Contact Details**

Contact Person   
Telephone After Hours  Mobile   
Email

**What is your legal status as an organisation? (please select one)**

- Company Limited
- Incorporated Association
- Statutory Body
- Unincorporated Group
- Are you / your organisation registered for GST?
- ABN Supplied

If you are not registered for GST you may need to complete a 'Statement by Supplier' form. We will contact you if a statement is required.

**SECTION B: COUNCIL SERVICE FEES and CHARGES ASSISTANCE only**

Name of Project/Activity

Lennies Legends - Relay for Life

Dates to be conducted

21-6-14

Location

George Town Memorial Hall

**Council Services**

If you wish to apply for assistance with Council Services, please nominate, including the \$ amount of assistance required (exclusive of GST).

- Hire of venue \$ 150
- Council Permit Fees \$
- Road Closures \$
- Waste Management \$
- Other (Please Specify) \$

**Declaration**

This declaration must be signed by a person authorised to sign on behalf of your organisation

- I certify to the best of my knowledge that the information given on this form is complete and accurate.
- I will provide appropriate insurance to cover the proposed event/activity/project and abide by all relevant health and safety standards.
- I understand that George Town Council does not accept any liability or responsibility for the proposal in this application and that it is the responsibility of the applicant to provide the appropriate insurance cover.
- I agree that if funded, funds will be used only for the project described in this application.
- I agree that all monies provided for in this grant will be reimbursed to Council should the event/activity/project be cancelled.

Signature

*[Handwritten Signature]*

Date 2 / 6 / 14

Print Name

fundraising member

Position in Organisation

Witness Signature

.....

Date  / /

Witness Name

.....

For further information on administrative issues and assistance to complete the application form, please contact:

George Town Council Community Events Officer  
03) 6382 8800 [council@georgetown.tas.gov.au](mailto:council@georgetown.tas.gov.au)

Please select the category of Community Grant for which you are applying, and complete the appropriate Section of the form:

Council Service Fees and Charges Assistance

Please go to SETION B

Project

Please go to SECTION C

Cultural Activity

Please go to SECTION C

Event

Please go to SECTION D *and* complete a George Town Council Event Application Form (available on Council's website and at Council offices)