

A. APPLICANT DETAILS

1. GROUP/ORGANISATION NAME: George Town Ambulance Social
 2. POSTAL ADDRESS: C/- GEORGE TOWN AMBULANCE CLUB
ANNE STREET GEORGETOWN
 3. CONTACT PERSON - Name: JOE BODIS
 Telephone: Home: 0418 120 585
 Business: _____
 Facsimile: _____
 Email: MRJO40M@gmail.com

4. Outline the aims and objectives of your group:
VOLUNTEER
WE ARE ALL AMBULANCE OFFICERS

5. What is your legal status as an organisation (tick one):

Company limited _____
 Incorporated association _____
 Statutory body _____
 Unincorporated group _____
 GST exemption form enclosed _____ or ABN _____

6. Details of previous Council grants:

Year	Project Description	\$

7. How long has your organisation been operating? APPROX 30 YRS

8. Number of active members: 25 MEMBERS

9. What sections of the community benefit directly from your organisation?
AS VOLUNTEER AMBULANCE OFFICERS
WE PROVIDE A SERVICE TO THE COMMUNITY
AND THE SURROUNDING AREAS

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B. DETAILS OF PROJECT:

1. PROJECT TITLE: FUND RAISING CONCERT

2. DESCRIPTION OF PROJECT: WOLF BROTHERS WILL BE PERFORMING AND PROCEEDS WILL BE DONATED TO OUR SOCIAL CLUB SO THAT WE CAN PURCHASE A RESCUS DOLL.

3. PLANNED COMMENCEMENT DATE: 12th APRIL

4. PLANNED COMPLETION DATE: 12th APRIL

5. What need is being met by this project?
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6. How did you establish this need?
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7. a. Estimate how many people will directly benefit from this project?

b. If this is an event, how many people do you expect will attend? APPROX 400

8. What will be the short and long-term benefits of your project to the George Town community?
BETTER TRAINING AND A HIGH SKILL IN FIRST AID.

9. DESCRIPTION OF ASSISTANCE SOUGHT FROM COUNCIL:
THE HIRING OF THE MEMORIAL HALL

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10. AMOUNT APPLIED FOR (IF APPLICABLE):.....

C. PROJECT MANAGEMENT

1. Who is managing the project? (if there is a steering committee, please list their skills and experience).

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2. How will you involve the community in this project?

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3. How will the project be monitored and evaluated?

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4. Will the project be ongoing?

Yes/No

If so, how do you propose to maintain funding levels?

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5. Describe how you will acknowledge Council's assistance:

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**ATTACH DETAILS OF YOUR CLEAN-UP PLAN IF YOU ARE
REQUESTING ASSISTANCE FOR AN EVENT.**

D. PROJECT BUDGET

Please complete the budget page below to account for all costs for your project. Include income and expense items according to your needs under the headings given. Include a copy of quotations for materials and/or from service providers where applicable.
(Attach extra pages if necessary)

1.

Expected Income (eg Sales, Fees, Other Government Grants, Cash Savings, Donations, etc).	\$
Total Income:	\$

Expected Costs (eg Wages, Venue Hire, Materials, Postage, Advertising, Equipment Hire, etc)	\$
Venue Hire	\$288
Total Costs:	\$
Project Shortfall:	\$
Grant Requested:	\$

2. Please detail other funding, support or sponsorship you have sought or will seek for this project. Please indicate the source, the amount and if this support is confirmed.

Name of Funding/Sponsorship Body	Amount Requested	Amount Received/Committed

3. Please detail the nature and level of in-kind support your community group is contributing to this project.

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\$288

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E. OTHER

Are there any further comments you wish to make in regard to this application?

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F. TAX STATUS

Are you/your organisation registered for Goods & Services Tax (GST)? YES NO

Do you/your organisation have an Australian Business Number (ABN)? YES NO

If YES, please provide your ABN:

If NO, you may need to complete a 'Statement by a Supplier'. We will contact you if a statement is needed.

I declare that I am authorised to submit this application on behalf of the applicant group.

Your Name: JOE BODIS.....

Signature: J. Bodis.....

Position Held: VOLUNTEER COORDINATOR / SOCIAL CLUB PRESIDENT

Date: 3RD FEB 2014.....

NO FURTHER ACTION WILL BE TAKEN TO PROCESS YOUR APPLICATION IF THE CORRECT INFORMATION HAS NOT BEEN PROVIDED, INCLUDING:

- a. Written evidence of incorporation or of your Group's relationship with another incorporated body;
- b. Most recent audited financial statement;

- c. Written quotations for ALL materials and services;
- d. A copy of your Clean Up Plan (for events);
- e. Written evidence of other community or government grants (where applicable);
- f. All previous grants from Council have been acquitted.

Please forward your application to:

**George Town Council,
P.O. Box 161,
GEORGE TOWN 7253**