

**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.

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)

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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. All details provided by you will form part of Council's agenda when considering your Community Grant application. 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.

## SECTION D: EVENT ASSISTANCE

*NOTE: A completed Event Application Form MUST accompany this application*

Event Title

"Bowls Club Carnival" would like it to be "Municipal Melody of Matches"

Dates to be conducted

Wednesday 8th. Feb. 2017

Location

George Town Bowls Club

Does your Event:

- Align with or support Council's Strategic goals
- Respond to demonstrated needs and concerns of the community
- Demonstrate wide community support
- Support and enhance the cultural life of George Town
- Enhance the image of the town as a vibrant place to live and visit
- Enhance community life by providing opportunities for participants to build relationships and networks

Total Budget for Event

\$1250-00

Description of Assistance sought from Council

We would like a grant of \$500 to assist with the running of the Carnival. The grant would ease the burden of costs for Advertising, Administration and Catering.

Total Amount of Grant Request

\$500

**Other Funding:**

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.

Agency / Organisation / Other

Fish Factory

Assistance Requested

\$200 -00

Assistance confirmed

- Yes
- No
- Pending

Agency / Organisation / Other

Assistance Requested

Assistance confirmed

- Yes
- No
- Pending

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

The members of the club are very active in the running of this carnival and make donations for our raffle and other venues for raising funds for the club.

Are there any other comments you wish to make to support this application?

The club would like to see the council become involved with this carnival annually

**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 agree to ensure all necessary approvals / permits are objected prior to the Project | Activity taking place.
- I will provide appropriate insurance to cover the proposed 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 if the Project | Activity is cancelled, that all monies provided for in this grant will be reimbursed to Council.
- I will provide the George Town Council with a post evaluation of the Project | Activity.

Signature

*[Handwritten Signature]*  
.....  
ROGER SCOTT TREGASKIS  
.....  
PRESIDENT.

Date 28, 12, 2016.

Print Name

Position in Organisation

Witness Signature

*[Handwritten Signature]*  
.....  
TIM WISDOLSON  
.....

Date 29, 12, 16.

Witness Name

**Application Check List**

Prior to submitting your Event Grant Application, please ensure you have checked all the following:

- You have read the eligibility criteria and guidelines
- Your application has been submitted at least one month prior to the event being held
- You have completed Sections A and D of the form
- You have signed and dated the application
- You have provided a completed event application and copies of any supporting materials (please do not send originals)

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)