

Sponsorship Program Application 2024/2025

Form Preview

Before Completing an Application

IMPORTANT: Please read information below to assist you in completing your application online.

BEFORE YOU BEGIN

Welcome to the George Town Council's online Minor Community Events Sponsorship Fund application service, powered by [SmartyGrants](#).

You may begin anywhere in this application form. Please ensure you save as you go.

Incomplete applications and/or applications received after the closing date will not be considered.

Before completing this application form, check that both your organisation and your project is eligible under the [Guidelines](#). The Guidelines provide essential information that will assist you in preparing an application.

Information for Applicants

The George Town Council is pleased to work in partnership and offer incentive and support for community events held in the George Town municipality that contribute to the development of a strong, vibrant and connected community. The provision of sponsorship funds is a mechanism by which Council furthers its strategic goals and objectives and supports sustainable community development.

The fund is focused on assisting events which deliver mutual benefit to Council and the applicant organisation, as well as specific community benefit outcomes that align with Council's strategic goals and objectives outlined in the Strategic Plan.

To view the full guidelines click [here](#)

If you have any questions in regards to these eligibility criteria, please Council on 6382 8800 or email - council@georgetown.tas.gov.au

The sponsorship program is available all year. Please ensure you apply at least 8 weeks prior to the event.

Privacy Statement

We pledge to respect and uphold your rights to privacy protection under the [Australian Privacy Principles](#) (APPs) as established under the *Privacy Act 1988* and amended by the *Privacy Amendment (Enhancing Privacy Protection) Act 2012*. Our Privacy Statement can be viewed on [Council's website](#)

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1. Assessment Criteria

* indicates a required field

Criteria Confirmation by Applicant Organisation

I confirm that the applicant ...

- Has read and understands the Minor Community Events Sponsorship Program Guidelines.
- Has met the criteria checklist above.
- Does not owe any reports or money to George Town Council as a result of previous funding or grants.
- Is an incorporated not for profit, or auspiced by an incorporated organisation, and/or have an ABN.
- Is located within and/or work within the George Town municipal area.
- Is inclusive in its membership and supportive of the broader community;
- Is located and operating in the George Town municipal area;
- Is not subject to any legal impediment or adverse circumstances.
- Has public liability insurance of \$20,000,000 demonstrated by the provision of a Certificate of Currency

This Minor Community Events Sponsorship Program will NOT support :-

- Ongoing administration and running costs
- Trophies or prize money
- Political activities
- Professional fundraising organisations
- Community organisations / groups with outstanding grant acquittals. All previous Council grants, where an acquittal is due, must be acquitted to a satisfactory standard. Unacquitted or unsatisfactory acquitted grants will deem an application ineligible.

Please select to confirm your Minor Community Events Sponsorship request meets the above conditions *

☐ I confirm the above conditions

Please upload your Public Liability Insurance certificate of currency *

Attach a file:

2. Applicants Details

* indicates a required field

Applicant organisation name *

Organisation Name

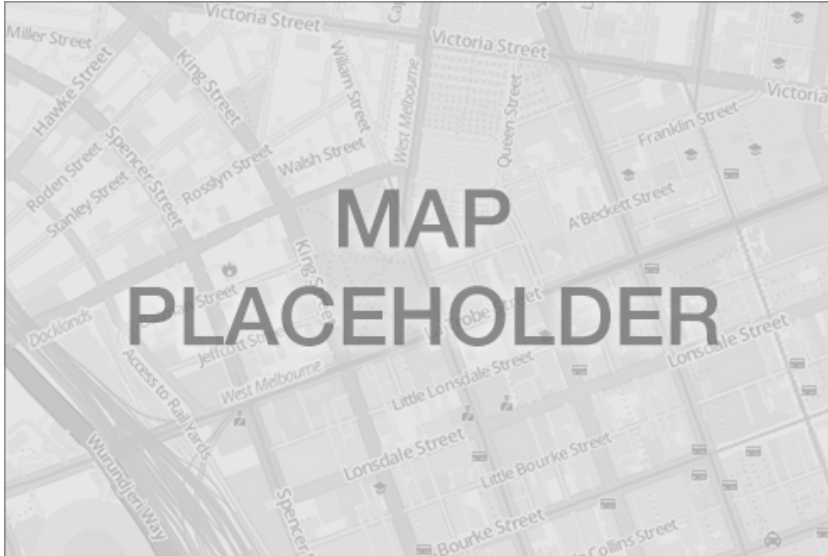
Please use your organisation's full name. Check your spelling and make sure you provide the same name that is listed in official documentation such as with the ABR, ACNC or ATO.

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Applicant Primary Address

Address



Applicant Postal Address *

Address

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

Applicant Website (if applicable)

Must be a URL

Primary Contact Person *

Title First Name Last Name

This is the person we will correspond with about this grant

How long has your Organisation been operating in the George Town municipality? *

Number of Volunteers / Employees *

Contact Phone Number *

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Primary contact person's email address *

This is the address we will use to correspond with you about this grant.

3. Organisation Details

*** indicates a required field**

Briefly outline your organisation's background and current activities *

How long has your organisation been operating in the George Town municipality *

How many active members do you have *

What sections of the community benefit directly from your organisation / group / club? *

ABN Details

Does your organisation have an ABN? *

☐ Yes

☐ No

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

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ACNC Registration
Tax Concessions
Main business location

Must be an ABN

As you do not have an ABN, please submit a completed ATO Statement by a Supplier Form with your application, otherwise 48.5% of any approved grant may be withheld. Download the form from [the ATO](#).

Please upload completed Statement of Supplier Form:

Attach a file:

Max 25mb

Legal Structure

What is your organisation legal structure? *

- ☐ Incorporated association or organisation
- ☐ Unincorporated association or organisation

If your organisation is unincorporated it must have an auspice organisation

Please provide a copy of your Organisations Certificate of Incorporation.

Attach a file:

Please provide details the Auspicing Organisation.

Name *

Organisation Name

Address *

Address

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

Phone Number *

Must be an Australian phone number.

Website

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Must be a URL.

Please upload the Auspicing Organisations Certificate of Incorporation *

Attach a file:

Please provide the ABN of your auspicing organisation *

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.

4. Event Details

* indicates a required field

Name of Event to be sponsored *

Provide a name for your project/program/initiative. Your title should be short but descriptive

Anticipated start date *

Anticipated end date *

If unknown, provide your best guess or leave blank If unknown, provide your best guess or leave blank

Location *

Please provide a brief description of the Event. *

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Must be no more than 100 words.

Please include details of the event including location and how many people you are expecting to attend

How did you determine a need for this Event. *

Please list objectives and outcomes *

Must be no more than 100 words.

Describe how this event will connect the broader community. Include volunteers of the project in this response.

Please briefly explain how these will be achieved *

Word count:

Must be no more than 150 words.

Please detail

Please explain how you will monitor and measure the objectives of your Event. *

Will you be able to conduct a visitor survey?

- ☐ Yes
☐ No
☐ Unsure

Please select the criteria that applies to your Event. *

- ☐ Aligns with or support Council's future direction
☐ Responds to demonstrated needs and concerns of the community;
☐ Demonstrates wide community support;
☐ Supports and enhance the cultural life of George Town;
☐ Enhances the image of the town as a vibrant place to live and visit;
☐ Enhances community life by providing opportunities for participants to build relationships and networks.
☐ Other

At least 1 choice and no more than 6 choices may be selected.

Please outline how you will meet the selection criteria you selected *

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Are any approvals required to complete the Event? *

- ☐ Yes
☐ No

See Event Planning Toolkit via website

Please list approvals and authorising agent. Pre-approvals must be in place before sponsorship will be considered

Authorising agent or organisation	Type of approval required	What stage are you at?
-----------------------------------	---------------------------	------------------------

Describe how this Event will comply with any COVID-19 legislation. Please visit the [Tasmanian Government's website](#) for current legislation.

*

Acknowledgement of Council's Assistance

Describe how you will acknowledge the assistance of the George Town Council *

- ☐ Display Council's Logo on all sponsored event material
☐ Letter of thanks to George Town Council
☐ Invitation to the Mayor to be given the opportunity to address the patrons
☐ Invitation to the Councillors, George Town Council's General Manager and the Mayor and his/her partner to attend the Event
☐ Provision of photos to Council post the project.
☐ Acknowledgement in any media
☐ Other:

At least 1 choice must be selected.

Please upload any supporting evidence, letters of support etc

Attach a file:

5. Budget

* indicates a required field

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Total Amount Requested

*

\$

What is the total financial support you are requesting in this application?

Total Event *

\$

What is the total budgeted cost (dollars) of your event, program or project?

Budget

Please outline your Event budget in the income and expenditure tables below, including details of other funding that you have applied for, whether it has been confirmed or not. Provide clear descriptions for each budget item in the 'Income' and 'Expenditure' columns

- **Your budget MUST balance which means your income and expenditure must be the same.**
- **EXAMPLES OF INCOME** could include Council's Community Grant', sponsorship, grants from other sources, contributions by the applicant or other project partners.
- **EXAMPLES OF EXPENSES** could equipment purchases, training resources, catering, payments to contractors,
- For expense items over \$250, quotes will need to be provided in the file upload area below the tables.
- Please **do not add commas** to figures – e.g. type \$1000 not \$1,000 – this will ensure your figures for each table total correctly.

If your organisation **IS** registered for GST, please provide **GST exclusive** amounts in your budget. Council will add GST to the amount funded, should your application be successful. If your organisation **IS NOT** registered for GST, your expenses should **include GST**, where applicable.

Income Description	Income Type	Confirmed Funding?	Income Amount (\$)	Notes
			\$	
			\$	
			\$	
			\$	

Expenditure Description	Expenditure Type	Expenditure Amount (\$)	Notes
		\$	
		\$	
		\$	
		\$	

Budget Totals

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Total Income Amount

\$

This number/amount is calculated.

Total Expenditure Amount

\$

This number/amount is calculated.

Income - Expenditure

This number/amount is calculated.
This amount should be zero - your income and expenditure need to be the same

Please attach quotes for those expenditure (cost) items over \$250

Attach a file:

**What other inputs will you need in order Confirmed?
to successfully carry out this Event?**

Non-financial inputs could include volunteer time / expertise, in-kind contributions, and other types of support.	

6. Applicant Capacity

* indicates a required field

Now that we know about your Event, we want to find out more about your organisation's ability to undertake the project you propose. Please provide some information about your organisation that will give us confidence that you can manage the Event. *

Word count:

Must be no more than 250 words.

Include in this section information about your strategies for providing the inputs (money, staff/ volunteers time/expertise, equipment, facilities, in-kind contributions, etc.) and how you will project manage this event in the required timeframe, inclusive of risk management policy. Provide information also about any past work that may demonstrate your organisation's capacity to manage this event planning..

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7. Applicant Declaration

* indicates a required field

Certification

This section must be completed by an appropriately authorised person on behalf of the applicant business (may be different to the contact person listed earlier in this application form).

I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant business is approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the letter of approval.

I agree *

☐ Yes

☐ No

Name of authorised person *

Title

First Name

Last Name

Must be a senior staff member, board member or appropriately authorised volunteer

Position

Position held in applicant organisation (e.g. CEO, Treasurer)

Contact phone number *

Must be an Australian phone number.

We may contact you to verify that this application is authorised by the applicant organisation

Contact Email *

Must be an email address.

Date *

Must be a date

8. Applicant Feedback

* indicates a required field

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

Please indicate how you found the online application process:

☐ Very easy

☐ Easy

☐ Neutral

☐ Difficult

☐ Very difficult

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

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Estimate in minutes i.e. 1 hour = 60

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.