EVENT SPONSORSHIP 2024-2025

* indicates a required field

Welcome to the City of Swan's Grant and Sponsorship Program.

Before starting your application, please read <u>Resource Guide and the Swan Event</u> <u>Sponsorship Information Sheet</u> for eligibility and assessment criteria.

Please ensure you have discussed your application with the Community Grants Team prior to submission. If you haven't, please call (08) 9207 8693 or email <u>communitygrants@swan.wa.gov.au</u> as they are ready to help you.

Please allow at least 12 weeks for your application to be processed. Applications that are incomplete or received outside the minimum lead-time may not be processed in time.

Confirmation of eligibility

I have read and understood the Resource Guide and the Swan Event Sponsorship Information Sheet $\ensuremath{^*}$

⊖ Yes

I have discussed this application with the Community Grants Team * $_{\bigcirc}$ Yes

I have no outstanding debts with the City of Swan *

I have acquitted all previous funding from the City of Swan *

○ Yes ○ No ○ Not Applicable

I confirm that I:

- Hold a current Certificate of Currency for Public Liability Insurance of \$20 million
- Am not requesting funding for a project that promotes the advancement of a political or religious organisation or lobby group

 \cap No

- Am not requesting funding for an event that is part of or a duplication of a current Government service
- Am not requesting funding for costs already funded by another grant or sponsorship
- Am not requesting funding for recurrent or core operating costs
- Am not requesting funding for reimbursement of costs that have already been incurred
- Am not requesting support for Capital expenses
- Am not requesting funding for private / ticketed activity only
- Will not attempt to contact or lobby an Elected Member of the City of Swan regarding this or another organisation's application

All statements are true: *

 \bigcirc Yes

⊖ No

If you answered NO to any above eligibility questions you may not be eligible for a Swan Event Sponsorship. Please contact the Community Grants Team on (08) 9207 8693 before proceeding with this application.

Applicant Details

* indicates a required field

Privacy Notice The City of Swan pledges 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. To view our privacy statement, go to https://www.swan.wa.gov.au/General/Legal/Privacy-Statement

Applicant Name *

 Individual Organisation Name 		○ Organisation
Title	First Name	Last Name

Organisation Contact Person *

Title	First Name	Last Name

This is the person best placed to discuss the event

Position held in Organisation *

Contact Person Phone Number *

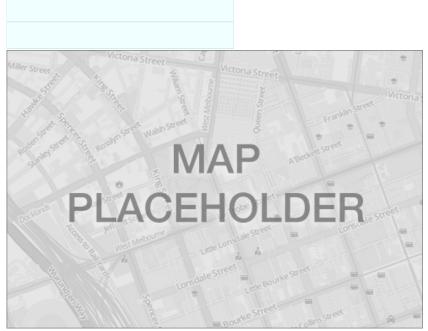
Must be an Australian phone number.

Contact Person Email *

Must be an email address.

Applicant Primary Address * Address

Event Sponsorship 2024-2025 Form Preview



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

Postal Address *

Address

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

Applicant 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	
ACNC Registration		
Tax Concessions		
Main business location		

Must be an ABN.

Event Sponsorship 2024-2025 Form Preview

Organisation Website

Must be a URL. Does your organisation have a website?

Please upload your organisation's Certificate of Incorporation (If Incorporated) Attach a file:

Do you require an Auspice Organisation? * O Yes O No Please read the Resource Guide for information on Auspice

Auspice Details

Auspice Organisation

Organisation Name

Auspice Organisation Contact Name

Title First Name Last Name

Auspice 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 Busi	ness 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	

Must be an ABN.

Auspice Primary Address

Address

Please upload a copy of Certificate of Incorporation of your Auspice Organisation Attach a file:

Auspice Primary Phone Number

Must be an Australian phone number.

Auspice Primary Email

Must be an email address.

Auspice Primary Website

Must be a URL.

Please attach a letter from your Auspice Organisation (confirming the Auspice arrangement) * Attach a file:

About Us

* indicates a required field

What is the primary purpose of your Organisation? *

Word count: Must be no more than 200 words.

Has your Organisation changed name since last funding? If yes include previous name, if no leave blank.

Are you an Aboriginal and Torres Strait Islander Organisation?

Are you an Aboriginal and Torres Strait Islander owned business?

Event Information

* indicates a required field

Event Title *

Event Start Date *

Must be a date. Sponsorship will not be provided restrospectively for events that have already ocuurred.

Event End Date *

Must be a date.

Will your event be held at a City of Swan managed venue including a park or other facility? *

⊖ Yes

O No

Event Address *

Address

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

Please provide a summary of your event. *

Word count: Must be no more than 500 words.

Please identify your Partners and the key Stakeholders involved in your event *

Must be no more than 100 words.

Stakeholders include any individuals, groups, or organisations who have an interest in or influence over the event. They may include community members, local government officials, non-profit organisations, businesses, and relevant service providers. Partners refer to the specific organisations or entities that are collaborating with you in implementing the event. They may provide resources, expertise, funding, or other support to help achieve project outcomes.

What is the expected event participation/attendance total? *

Must be a number.

How many volunteers will contribute to or be involved in your event? *

Must be a number.

How often is your event held? *

e.g. Annually, Once off, Bi-annual

Please describe your Event's target audience. *

Must be no more than 25 words. Example: CALD, Multicultural, People Living with Disability, Seniors, Young People, Children, Vulnerable Community etc.

Please provide information on how your event will be accessible and inclusive? *

Word count:

Must be no more than 150 words.

How will you ensure everyone is welcome with barriers to participation removed e.g. multicultural needs, people living with disability, affordable activities etc. See the Accessible Events Checklist on the City's Grant and Sponsorship Webpage.

How will your event be promoted?

Descibe the ways the event will be promoted and participants reached, e.g. Facebook, TV or radio advertising, Website, Newletters, Street banners, etc

Through this Sponsorship you will be required to acknowledge the City of Swan's support. How will you do this? *

Word count: Must be no more than 150 words. See Resource Guide - Describe the ways support received will be acknowledged

Value Level of Sponsorship

The Swan Event Sponsorship is categorised into 3 levels of support, based on dollar value. The eligibility requirements and assessment criteria for each level can be found in Swan Event Sponsorship Information Sheet.

What level are you applying for? *

- Level 1 Up to \$5,000
- Level 2 Between \$5,000 and \$10,000
- O Level 3 Between \$10,000 and \$25,000

Level 1 - Small & Local Events; Level 2 - Medium sized Community Events; Level 3 - Large Signature/ Destination Events

Please identify the primary Objectives from the City's Strategic Community Plan, with which your event aligns. *

 Actively support and develop thriving local
 Build social inclusion and connectivity in businesses and centres
 Build a strong sense of community health,
 Sustainable and optimal use of City wellbeing and safety
 At least 1 choice must be selected.

Please explain how your event supports these Objectives. *

Word count: Must be no more than 250 words.

Please provide a short summary of your Organisation's planning and capacity to deliver this event. (Can it be achieved and how?) *

Word count: Must be no more than 250 words.

Please describe how your Event will have a positive benefit to the local and broader community, both during and after it is completed. *

Word count: Must be no more than 500 words. Address community need and sustainability

Please explain how your Event encourages community participation and capacity building? *

Word count: Must be no more than 200 words.

Event Outcomes

Please summarise in bullet points your events key outcomes. *

How will you know if you have achieved your event outcomes. *

Word count:

Must be no more than 250 words.

How do you plan to assess and measure the benefits and success of the event? *

- □ Number of attendees
- $\hfill\square$ Social media engagement $\hfill\square$ Media publicity
 - Media publicity
 Positive community impact

□ Other

- Number of participantsNumber of volunteers
 - □ Survey feedback
 - Media releases

Evaluation is required to provide details of the event impact in your acquittal. Surveys or questionnaires: Feedback from stakeholders, participants or beneficiaries; Quantitative data analysis: website traffic, attendance records; Qualitative interviews or focus groups: conduct interviews or organise focus groups to gather in-depth insights and stories from individuals affected by the project; Comparative analysis: compare data from before and after the project implementation to identify any changes or improvements;

Budget

* indicates a required field

Please provide a detailed project budget by completing the income and expenditure tables below and/or uploading your budget worksheet.

Include details of other funding that you have applied for, whether it has been confirmed or not.

It is encouraged that you have other sources of income, which could include your own Organisation's funds.

All amounts should be **GST exclusive**.

Provide clear descriptions for each budget item in the Income and Expenditure columns, e.g. equipment hire, marketing, venue, catering, consumables etc.

Budget

Expenditure Item	\$ amount of item	Income Source	\$ amount of item	Quotes for items over \$1000
		Income source for this expenditure item. e.g. City of Swan, Applicant or Partner contributior	n	
	\$		\$	

Event Sponsorship 2024-2025 Form Preview

\$ 5	\$	
\$ 5	\$	
\$ 5	\$	

Budget Totals

Total Expenditure Amount

\$ This number/amount is calculated. Total Income Amount \$ This number/amount is calculated.

Income - Expenditure	2
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\$ This number/amount is calculated. This needs to balance zero.

Please attach your event budget worksheet (optional)

Attach a file:

Confirm the amount you requesting from the City of Swan? *

\$

Must be a dollar amount.

Please list which expenditure items the City of Swan Sponsorship will be specifically used for.

Word count:

Must be no more than 100 words. e.g. equipment hire, marketing, first aid, entertainment

In-Kind Contributions

Please identify the estimated dollar value of your Organisation's in-kind event support. In-kind support refers to any non-cash project contributions such as free venue hire, donated materials or volunteer time from yours or partner Organisations. For example: One volunteer event staff working 14hrs x \$30hrs equals an in-kind value of \$420.00

In-kind Contribution	\$
	\$
	\$
	\$
	\$

In-Kind Contributions Totals

Total In-Kind Income Amount

\$

This number/amount is calculated.

Supporting Documentation

* indicates a required field

ALL APPLICANTS Please attach copy of your organisation's Public Liability Certificate of Currency *

Attach a file:

Public Liability Insurance coverage up to \$20 million

Does your project include child-related work? *

○ Yes

○ No

If so please upload copies of WWC card Attach a file:

Please attach your most recent audited financial statement (Level 3 only) Attach a file:

A maximum of 1 file may be attached.

Please attach your Event Management Plan (relative to the size and nature of the event)

Attach a file:

Please attach your Risk Management Strategy (relative to the size and nature of the event)

Attach a file:

Would you like to share additional information to support your application? e.g. letters of support, plans, reports etc.

Attach a file:

A maximum of 5 files may be attached.

Have you read the Public Events Guidelines and completed the application? See the City of Swan Organising a Public Event webpage.

Filling out this application does not ensure the booking of any City of Swan venues or Public Event Approval, please complete your booking/event request before submitting this application.

Declaration

* indicates a required field

This application must be made by an authorised person on behalf of the Applicant Organisation.

I certify that the statements made below and within this application are true and correct, and I understand that we are required to use the funding for the budget items indicated. I further understand and accept that by submitting this application I:

- Will be required to provide evidence of the event's acknowledgement of the City's support, e.g. screenshots of social media posts, announcements, newsletters with appropriate use of the City's logo.
- Understand any changes to a successful sponsorship require prior approval from the City by contacting the Community Grants Team on 9207 8693 or communitygrants@swan.wa.gov.au.
- Will need to provide a full acquittal which provides full evidence of event expenditure and the events achievements within three months of the Event. This acquittal will need to include copies of receipts.
- Will be responsible for consequences of non-acquittal as outlined in the Resource Guide.
- Give permission to the City of Swan to contact any persons or Organisations in the assessment or review of this application and understand that information may be provided to other agencies as appropriate.
- Give permission to the City of Swan to use Organisation and Event details and/or imagery for listing on a Public Reporting Platform (only non confidential under Privacy Act 1988).

l agree * O Yes		0	No
Name of authorised pers Title First Name			
Position *			
Phone Number *			
Must be an Australian phone n	number.		
Email *			
Must be an email address.			
Good News Stories			

The City would love to run a story about your experience on our Website and or our Social Media pages. We would love to hear about your experiences so please send in photo's and a short story about your experience to <u>communitygrants@swan.wa.gov.au</u>.