

Application Form

Donations, Contributions and Subsidies Fund

All correspondence to:

The Chief Executive Officer, Locked Bag 1, Busselton WA 6280

P: (08) 9781 0444 E: city@busselton.wa.gov.au W: www.busselton.wa.gov.au

Application Number: _____ / _____ (Office Use Only)

Please ensure that you have read and understood the 'Donations, Contributions and Subsidies Funding Guidelines' before proceeding with this application.

Applicant	_____	
	Is this application being made on behalf of an: <input type="checkbox"/> Individual <input type="checkbox"/> Not for Profit Group	
Contact Person	_____	
Position Held	_____	
Telephone	Mobile: _____	Home/Work: _____
Email Address	_____	
Postal Address	_____	
Amount Requested	\$ _____	(not to exceed \$1,000.00)
Event / Activity Location	_____	
Nature of Request	<input type="checkbox"/> Event <input type="checkbox"/> Special Circumstances (see guidelines)	

Your Application:

1. Do you reside in the City of Busselton or in the case of an organisation/group/team, do you operate from or are you based in the City of Busselton? Yes No N/A

2. What specifically is funding to be used for?

If you are applying for funding to host an event, please provide an itemised list of expenses

3. How will your event / activity benefit the local community?

4. Have you/your organisation received financial assistance / sponsorship from the City of Busselton this financial year? Yes No N/A

If 'Yes' please provide details:

5. Are you seeking funds from other avenues/raising funds to contribute towards the planned activity? Yes No N/A

If 'Yes' please provide details:

6. How will the City of Busselton be recognised as a sponsor? Please specify how:

- Media Coverage Acknowledgement at Event
 Logo in Promotion Material City of Busselton Banner Displayed at Event

Other: _____

7. Further information about your event / activity (attach any flyers/ posters):

8. Please attach proof of selection through a formal qualifying process if applying under "Special Circumstances – representing your municipality, state or country".

Declaration:

I _____ (name in full) declare that:

- a) I am duly authorised by the applicant to make this application;
- b) The information provided above and attached is true and correct to the best of my knowledge;
- c) I shall promptly notify the City of Busselton in writing of any changes to the information contained in this application and attachments;
- d) Any funds granted by the City of Busselton will be used in the manner and on the conditions stated in this application;
- e) To the best of knowledge there will be no conflict of interest between the applicant and the City of Busselton arising from this application;
- f) The applicant shall not make any misleading public statement concerning this application;
- g) The applicant shall comply with all State and Commonwealth laws relevant to this application and any activity in connection thereto;
- h) The applicant indemnifies the City of Busselton and its officials and employees against any/all liabilities as a result of any action, suit, claim, demand or proceeding taken or made by any third party arising from or in connection with this application or any activity in relation thereto;
- i) Nothing in this application may be construed to make the applicant a partner, agent, employee or joint venture of the City of Busselton State; and
- j) The applicant shall not represent that the applicant or any of its members, employees or officials are the employees, agents, partners or joint ventures of the City of Busselton.

SIGNATURE: _____ **DATE:** _____

Please submit this application via one of the following methods:

- Email to city@busselton.wa.gov.au
 - Mail to City of Busselton Locked Bag 1 Busselton WA 6280
- or
- Deliver by hand to City of Busselton Administration, 2 Southern Drive Busselton WA 6280