



COMMUNITY GRANTS PROGRAM

2016/2017

**Major Event
Sponsorship**

Application Package



Major Event Sponsorship Application Package

Applications are invited from incorporated not for profit organisations/associations (e.g. community groups and clubs), to assist with the delivery of major events that benefit the Rockingham community. Eligible applicants can apply for amounts up to \$20,000 per year for up to 3 years. Major event sponsorships are considered by Council and require 60 working days to process. A formal grant acquittal process is mandatory and must be received by the City within 60 working days after the completion of the event.

Major Event Sponsorship applications can be submitted at any time however they are only considered three times a year. Applications must be completed in full by the applicant and received by the City by the closing date.

Grants will only be considered if:

- ✓ The applicant is an incorporated not-for-profit organisation/association (e.g. community group or club)
- ✓ The applicant has current public liability insurance at the time of the major event.
- ✓ The major event delivers significant benefits for the Rockingham community.
- ✓ The major event takes place at strategic location within the boundaries of the City of Rockingham.
- ✓ The applicant can provide past evidence of delivering a successful event in previous year/s, e.g. attracting over 5000 people for Community Development Events or contributing to the aims and objectives of the City's Economic Development Strategy for Economic Development Events.
- ✓ With inaugural events the applicant must demonstrate experience of managing similar scaled events or state partnerships utilising these skill sets to deliver a successful event.
- ✓ The applicant can demonstrate significant volunteer involvement with the major event.
- ✓ The applicant identifies the City as a major sponsor.
- ✓ Applications have been received completed in full by the City by the closing date.
- ✓ The applicant has supplied quotes for all purchases in accordance with the major event sponsorship guidelines.

Grants will NOT be considered if:

- ☒ The applicant is a Local, State or Commonwealth authority.
- ☒ The applicant is an individual, a school, or a private company.
- ☒ The applicant has already received a grant from the City of Rockingham for the same major event in the current financial year.
- ☒ The applicant has failed to acquit any previous City of Rockingham grants.
- ☒ The applicant does not supply all supporting documentation; or the application is incomplete.
- ☒ The application is received by the City after the closing date.
- ☒ The applicant is requesting funding for retrospective payments.
- ☒ The major event begins within 60 working days after the closing of the round.

Items that are ineligible for funding include: Bonds, employee salaries/wages and event management fees. Prior to applying, please also read the full Community Grants Program Policy and Guidelines on the City's website (www.rockingham.wa.gov.au).

Completed proposals should be forwarded to:

Electronic copies: customer@rockingham.wa.gov.au

Hard copies:

Community Capacity Building
City of Rockingham
PO Box 2142 ROCKINGHAM DC WA 6967



Major Event Sponsorship Application Form

The Community Grants Program aims to provide assistance to incorporated not for profit organisations/associations (e.g. community groups and clubs) that can deliver significant benefits and outcomes in the target areas listed below. Please select the event and term that is the best fit for your event sponsorship:

Economic Development Event: Past evidence of a successful event in the previous calendar years that has made a significant contribution to the aims and objectives of the City's Economic Development Strategy (for a copy of the strategy see City's website www.rockingham.wa.gov.au)

Term:

One
year

OR

Up to three consecutive years

OR

Community Development Event: Past evidence of the delivery of a successful event in the previous calendar year (or years) that attracted at least 5000 people and was conducted in a strategic location that serviced a discrete geographical area. Applicants must demonstrate a legitimate and long standing association with that discrete area.

Term:

One
year

OR

Up to three consecutive years

OR

Inaugural Event: As an inaugural event cannot demonstrate past evidence of a successful event, the applicant must demonstrate within the application all other criteria requirements to be eligible for up to \$20,000 for one year only.

Note: An initiative funded in Year 1 does not automatically qualify for funding in subsequent years. All applicants need to reapply and be reassessed unless approved for a three year period.

Step 1A: About your Organisation

(Applicant Details) –Please fill in Step 1A, alternatively if using an auspice organisation, fill in both Step 1.1 and Step 1B.

1.1 Organisation's Name (Legal Trading Name):

1.2 Organisation's registered business address details (not PO Box):

Street Address:

Suburb/Town/City:

State:

Postcode:



1.3 Postal address only if different from registered business address:

Street Address:

Suburb/Town/City:

State:

Postcode:

1.4 Organisation's contact details:

Contact Persons Name:

Telephone Number 2 (Organisations):

Telephone Number 1 (Contact Persons Direct Line):

Mobile:

Email 1 (Organisations):

Email 2 (Contact Persons Direct):

1.5 Is your organisation registered with an Australian Business Number (ABN) or Australian Registered Business Number (ARBN)?

Yes - please provide details:

ABN _____ - _____ - _____ - _____

ARBN _____ - _____ - _____

No

(if you do not have an ABN number please download and complete a Statement by a Supplier form, visit <http://www.ato.gov.au>).

Does your group have an ABN and is it GST registered?

If YES, you are liable to pay GST. If this applies to you, the City of Rockingham will automatically increase successful grant applications by 10%. A completed Recipient Created Tax Invoice must be provided by funds recipient (either applicant or auspicing body.)

ABN but not GST registered?

If YES, you are not liable to pay GST.

If you do not have an ABN?

If your group is not required to have an ABN, you will need to complete a 'Statement by a Supplier' form. If this form is not supplied, up to 48.5% of the grant or donation may be withheld

1.6 Is your organisation registered for GST (Goods and Service Tax)?

Yes

No

1.7 Is your organisation incorporated?

Yes: please attach a copy of your Incorporation Certificate.

No: you may apply for a grant through an auspicing body, go to 1.12.



1.8 Do you have public liability insurance? *(MUST be current and provides cover for the proposed project/activity)*

Yes: please attach current copy of public liability insurance certificate.

No: your application will be deemed ineligible.

1.9 Do you have a copy of the organisation’s audited financial statement. *(Financial statement from last annual general meeting).*

Yes: please attach a copy of audited financial statement.

No: your application will be deemed ineligible.

1.10 Please attach a copy of minutes where major event was endorsed by the organisation.

Yes: please attached copy of minutes

No: your application will be deemed ineligible.

1.11 Please describe your organisation and its purpose in 150 words or less AND provide a hyperlink to the organisation’s constitution that explains the purpose of the group.

The Constitution hyperlink is _____

OR

Describe your organisation in 150 words or less *(how long existed, history, current membership, include any other important information to build the picture for the assessment panel).*



1.12 Will you be applying for this grant through an auspicing body?

Yes: please go to Step 1B.

No: please go to Step 2.

What is an auspicing body?

An auspicing body is an incorporated group that applies for a grant on behalf of an unincorporated group. The auspicing body is responsible for the financial management of the grant.

Step 1B: About the auspicing organisation

1.13 Auspicing organisation's Name (Legal Trading Name):

1.14 Auspicing organisation's registered business address details (not PO Box):

Street Address:

Suburb/Town/City:

State:

Postcode:

1.15 Auspicing organisation's postal address only if different from registered business address:

Street Address:

Suburb/Town/City:

State:

Postcode:

1.16 Auspicing organisation's contact details:

Telephone Number:

Mobile:

Email:

1.17 Is the Auspicing organisation registered with an Australian Business Number (ABN) or Australian Registered Business Number (ARBN)?

Yes: please provide details:

ABN _____ - _____ - _____ - _____

ARBN _____ - _____ - _____

No: if you do not have an ABN number please

download and complete a Statement by a
Supplier form, visit <http://www.ato.gov.au>.

1.18 Is the Auspicing organisation registered for GST (Goods and Service Tax)?

Yes

No

1.19 Is the Auspicing organisation incorporated?

Yes: please attach a copy of the
Incorporation Certificate.

No: your application will be deemed ineligible.

1.20 Does the Auspicing organisation have public liability insurance? (MUST be current and provides cover for the proposed project/activity).

Yes: please attach a current copy of
insurance certificate.

No: your application will be deemed
ineligible.



1.21 Do you have a copy of the auspicing organisations audited financial statement. *(Financial statement from last annual general meeting).*

Yes: please attach a copy of audited financial statement.

No: your application will be deemed ineligible.

1.22 Does your organisation have a written agreement (email/letter) form the Auspicing body stating their support for the financial management of this grant?

Yes: please attach a copy of the agreement.

No: your application will be deemed ineligible.

If the organisation agrees to auspice you, you'll need to work with them to put an agreement into writing. They might already have forms you can use, but if not you may have to develop an inaugural agreement. When drafting an Auspice Agreement, both parties must be careful to include all of their intentions and expectations, and must be clear about roles and responsibilities.

1.23 Please describe the auspice organisation and its purpose in 150 words or less OR provide a hyperlink to the organisation’s constitution that explains the purpose of the group:

The Constitution hyperlink is _____

OR

Describe your organisation in 150 words or less *(how long existed, history, current membership, include any other important information to build the picture for the assessment panel).*



Step 2: Tell us about any previous grants

If the organisation (or the auspice organisation) has previously received funding from the City of Rockingham you **MUST** complete this step.

2.1 Has your organisation (or the auspicating organisation) received funding from the City of Rockingham within the last 5 years?

No: please go to Step 3.

Yes: please fill out details below.

<i>Title of Major Event the funding was used for</i>	<i>Date of Funding Received (DD/MM/YY)</i>	<i>Amount of Funding Received \$</i>	<i>Acquittal Status Completed or Outstanding?</i>
1)		\$	
2)		\$	
3)		\$	
4)		\$	
5)		\$	

Acquittal Status

Acquittal Status "Completed" - means you have provided a detailed report of how the grant money was used, provision of receipts, photos etc. Acquittal Status "Outstanding" – means you have not yet provided a detailed report of how the grant money was used. The City of Rockingham requires some grants to be acquitted using the Grants Acquittal Form before applying for another grant. If you are unsure please contact a City Community Development Officer on 9528 0333.



3.7 Please list any significant community benefits your event is likely to have:

Short term benefits:	Long term benefits:

3.8 Please list any significant economic benefits your event is likely to have:

Short term benefits:	Long term benefits:

3.9 Where will the event take place?

Venue/Location Name:

Street Address:

Suburb:

Postcode:

3.10 Has the venue/location been booked/confirmed?

Yes

No (*this is your responsibility to book & confirm*)

3.11 How many people do you predict attending your event (select one)

<1000

1001-8000

8001-10000

10001-18000

18001+

3.12 Is there capacity for the event to grow in the future?

Yes: *Please expand:*

No

Year 1: _____

Year 2: _____

Year 3: _____

3.13 What age bracket does your event audience target?

Children <11yrs

Youth 12-18yrs

Adults

Seniors 60+

All Ages



3.14 If your application relates to hosting/running an outdoor event, has an Outdoor Event Application been submitted to the City?

- | | |
|--|--|
| <input type="checkbox"/> Yes: approved (<i>attach approval from City's Health Services</i>) | <input type="checkbox"/> No, not required (<i>attach correspondence/proof from City's Health Services that it is not required</i>) |
| <input type="checkbox"/> Yes: submitted (<i>attach correspondence from City's Health Services</i>) | <input type="checkbox"/> Not Applicable (<i>not hosting outdoor event</i>) |

3.15 Will this event attract overnight stays in Rockingham?

- Yes: No
- Please estimate how many people: _____*
- And estimate number of nights per person: _____*

3.16 How many volunteers will assist with organising the event?

Number of volunteers involved in the lead up to the event: _____

Number of volunteers required on the actual day/s of the event: _____

3.17 You will need to ensure that you are aware of the City's Disability Access and Inclusion Plan (DAIP). Have you viewed this plan? (*Visit the City's website to view a copy of the Disability Access and Inclusion Plan www.rockingham.wa.gov.au*).

- Yes No

3.18 Tick the following areas, where your organisation has considered the project/activity to be accessible, as per the DAIP:

- | | | | | |
|--|---|--|--|--|
| <input type="checkbox"/> Access to services and events | <input type="checkbox"/> Access to buildings and other facilities | <input type="checkbox"/> Access to information | <input type="checkbox"/> Access to public consultation | <input type="checkbox"/> Equity of service from volunteers and staff |
|--|---|--|--|--|

3.19 If the applicant is awarded funding from City of Rockingham, they will be required to identify the City as a major sponsor. Apart from the ticked boxes below, how else will the applicant achieve this? (Tick applicable boxes):

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> City logo on printed materials (flyers, posters etc.) | <input checked="" type="checkbox"/> Council Banners (as per booking form) | <input checked="" type="checkbox"/> Acknowledgement of City's contribution (verbal/written) |
| <input type="checkbox"/> Social Media (Facebook/website) | <input type="checkbox"/> Media – local community newspapers | <input type="checkbox"/> Media – outside of Rockingham |
| <input type="checkbox"/> Other, please state: _____ | | |



3.20 Does this major event make a profit?

Yes: Please list how this profit will be redirected back into the Rockingham community:

No: (not applicable)

3.21 Has your organisation (or the auspicing organisation) received funding from the City of Rockingham within the last 5 years?

Yes: please fill out details below.

No: please go to Step 4.

Funding Agency	Amount \$	Items to be funding from this agency	Approved		
			Yes	No	Pending <i>specify date will know outcome</i>
<i>E.g. Lotterywest</i>	<i>\$10,000</i>	<i>Staging, infrastructure</i>			<i>Pending 21/10/2015</i>



Step 4: Past Evidence of events/Inaugural event

If you are applying for an Economic Development Event please fill in step 4A.
If you are applying for a Community Development Event please fill in Step 4B.
If you are applying for a Community Development Event please fill in Step 4C.

Step 4A: Past Evidence of economic development/tourism events.

Visit the City's website www.rockingham.wa.gov.au under Investment Attraction to view the Economic Development Strategy.

4.1 What is your experience in delivering economic development events?

Some experience
in event delivery

Good level of
experience in
event delivery

Very experienced in
event delivery

4.2 How long has the event been running?

1-3 years

3-5 years

6-10 years

11-20 years

21+

4.3 What was the previous calendar year/s event called?

4.4 What were the key outcomes of this event?

4.5 Where was the event held (venue and suburb)?

4.6 How many people attended the event (participants and attendees)

<1000

1001 – 5000

5001 – 10000

10001 – 18000

18001+



4.7 How did this event contribute to the aims and objectives of the City's Economic Development Strategy?



Step 4B: Past Evidence of community development event/s

4.8 What is your experience in delivering community development events?

Some experience
in event delivery

Good level of
experience in
event delivery

Very experienced
in event delivery

4.9 How long has the event been running?

1-3years

3-5years

6-10years

11-20years

21+

4.10 What was the previous calendar year/s event called?

4.11 What were the key outcomes of this event?

4.12 Where was this event held (venue and suburb)?

4.13 What is the association between the applicant and the location where the event was held?

4.14 How many people attended the event?

8001 – 10000

10001 – 18000

18001+



Step 5: Provide your event budget (refer to example on next page).

EXPENDITURE		Actual Cost (\$)	INCOME		Actual Cost (\$)
Budget Item (please detail each item)			Budget Item		
			Organisation's Cash Contribution		
			City of Rockingham REQUESTED Grant \$ <i>(specify which items listed in expenditure, this grant \$ will be spent on)</i>		
			Donations		
			Sponsorship		
			Other grants/funding		
			Additional contributions from other sources <i>(specify, e.g. fees charged)</i>		
Other (specify)					
Sub Total Cash Expenditure			Sub Total Cash Income		
Expenditure In-Kind (if relevant)			Income In Kind (if relevant)		
Professional Fee			Professional Fee		
Administration			Administration		
Volunteers			Volunteers		
Other specify:			Other specify:		
Sub Total In-Kind Expenditure			Sub Total In-Kind Income		
Total Expenditure <i>(Add two expenditure sub-totals together)</i>			Total Income <i>(Add two income sub-totals together)</i>		

Notes:

1. Do not include GST (Where appropriate, 10% will be added to successful grants).
2. Complete expenditure in-kind first and copy these amounts into income in-kind.
3. Quotes to be supplied for all purchases as per CGP Major Event Sponsorship Guidelines.
4. Attach a copy of your financial statement (that discloses your position). If more practical, you may also attach a different format for the budget from the above BUT please consider all headings.
5. Please calculate the value of volunteer hours at \$25/hour/volunteer.
6. In-kind contribution refers to donations/absorption of goods or services that have a value e.g. venue costs, donated materials, or volunteers time. Estimate the dollar value for each item to include in your budget.
7. Funding will not be for bonds, salaries/wages or event management fees.

EXAMPLE OF BUDGET



Budget Item	Actual Cost (\$)
EXPENDITURE (please detail each item)	
Hire Marquees, tables, chairs	3870
Generators	1420
Shuttle bus	500
First aid & Security	7600
Traffic Management	3540
Advertising	1570
Catering	5000
Equipment purchase	10,000
Promotional material	5000
Waste Management	500
Extra toilet facilities	2000
Sub Total Cash Expenditure	35,000
Expenditure In-Kind (if relevant)	
Professional Fee	2500
Administration	500
Other specify: Venue Hire	1850
Volunteer hours	1000
Printing	500
Sub Total In-Kind Expenditure	6350
Total Expenditure (Add two sub-totals together)	41,350

Budget Item	Actual Cost (\$)
INCOME	
Organisation's Cash Contribution	5000
City of Rockingham REQUESTED Grant \$ (specify which items this grant \$ will be spent on)	18,500
- \$3870 Hire Marquees, tables, chairs	
- \$1420 Generators	
- \$500 Shuttle bus	
- \$7600 First aid & Security	
- \$3540 Traffic Management	
- \$1570 Advertising	
Donations	2500
Sponsorship	
Other grants/funding	
- Lotterywest – equipment purchase	10000
Additional contributions from other sources (specify, e.g. fees charged)	
Sub Total Cash Income	35,000
Income In Kind (if relevant)	
Professional Fee	2500
Administration	500
Other specify: Venue Hire	1850
Volunteer	1000
Printing	500
Sub Total In-Kind Income	6350
Total Income (Add two sub-totals together)	41,350



Step 6A: Conflict of Interest

Is any member of your committee employed by an organisation that may benefit financially from this grant if successful?

Yes (please state the nature of this interest):

No

Step 6B: Declaration of Applicant

I _____ (**Name of Person**)
_____ (**Position Title**) of
_____ (**Organisation Name**) do hereby

declare that I am authorised on behalf of the organisation to sign this declaration and the information supplied is, to the best of my knowledge, accurate and complete. The City of Rockingham will be notified of any change to the information supplied and any other information or circumstances arising that may affect this application. I understand that any decision made by the City of Rockingham is final and is not subject to an appeals process.

Signature: _____

Date: ____ / ____ / ____

Witnessed By Officer Bearer:

Name: _____

Position: _____
(Held in organisation)

Signature: _____

Date: ____ / ____ / ____

Any information disclosed in this form will only be used by the City of Rockingham for the purposes of assessing funding proposals under the Community Grant Program and will be maintained in accordance with the Privacy Act 1988.



Step 7: Checklist

Have you:

- Completed all the applicable steps
- Completed Step 6 with a signature from authorised office bearer together with signature from witness.
- Kept a copy of your signed application and attachments.

Have you included the following documents with your application:

Any applications received without all of the appropriate documents will be deemed ineligible.
(Please submit only copies of your original documents)

Organisation: Organisation (Step 1A):	OR	Auspicing organisation (Step 1B):
<ul style="list-style-type: none"> <input type="checkbox"/> Statement by a Supplier Form if required (see step 1.5). <input type="checkbox"/> A copy of your Incorporation Certificate (see step 1.7). <input type="checkbox"/> A copy of Public Liability Certificate (see step 1.8). <input type="checkbox"/> A copy of audited financial statement (see step 1.9). <input type="checkbox"/> A copy of minutes (see step 1.10). <input type="checkbox"/> Constitution: provided hyperlink/description (see step 1.11). <input type="checkbox"/> Copy of written quotes (see step 5). <input type="checkbox"/> Copy of any other supporting information (e.g. proof of outdoor event approval). 	OR	<ul style="list-style-type: none"> <input type="checkbox"/> Statement by a Supplier Form if required (see step 1.17) <input type="checkbox"/> A copy of your Auspicing Body's Incorporation Certificate (see step 1.19). <input type="checkbox"/> A copy of Public Liability Certificate (see step 1.20). <input type="checkbox"/> A copy of audited financial statement (see step 1.21). <input type="checkbox"/> A written agreement between applicant & Auspicing Body (see step 1.22). <input type="checkbox"/> Constitution: provided hyperlink/description (see step 1.23). <input type="checkbox"/> Copy of written quotes (see step 5). <input type="checkbox"/> Copy of any other supporting information (e.g. proof of outdoor event approval see 3.14 etc)

If you have completed all of the above, you are ready to submit your application.

If you have any queries, please contact the City's Community Development Officer, on 9528 0333.

Please submit your application (including attachments) via email, post or in person:

In Person:	By Mail:	Via Email:
Customer Service City of Rockingham Administration Building Civic Boulevard Rockingham WA 6168	Community Capacity Building City of Rockingham PO Box 2142 Rockingham DC WA 6967	customer@rockingham.wa.gov.au