

GCC Sponsorship Program Application Form - In kind Sponsorship Form Preview

Organisation Information

* indicates a required field

Organisations Details

Name of Agency / Group / Organisation or Corporation *

Organisation Email

Must be an email address

Organisation Postal Address

Address

Suburb State Postcode

Must be an Australian post code

Organisations 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

Is your organisation Not For Profit?

- ☐ Yes
☐ No

Is your organisation incorporated?

- ☐ Yes

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Is your Organisation any of the following?

- ☐ Business
- ☐ Political Organisation
- ☐ Local, State or Federal Government Department
- ☐ Individual
- ☐ Educational Institution
- ☐ Charity
- ☐ Religious Organisation
- ☐ Other:

Does your organisation have a bank account in its own name? *

- ☐ No
- ☐ Yes

Briefly describe what services, activities and/or facilities are offered by your organisation? *

Word count:

Must be no more than 50 words

Contact Person Details

Contact Person *

Title

First Name

Last Name

Contact Person Email Address

Contact Person Phone Number

Contact Person Mobile Number

Position in Organisation *

Applicant must hold a position listed

Project Information

*** indicates a required field**

Project Details

Program / Event Name *

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Project / Event Summary

*

Word count:

Must be no more than 250 words

Proposed Start Date

Must be a date

Proposed Finish Date

Must be a date

If your project is an event, what is the proposed date of this event?

Must be a date

Proposed location of the program / event *

Have you received funding for this program / event previously from Gosford City Council?

- ☐ No prior funding received
- ☐ 2014
- ☐ 2013
- ☐ 2012
- ☐ 2011
- ☐ 2010

Assessment Criteria

Criteria 1 - Program / Event Quality

Describe how your project / event will contribute to a positive image of Council.

The following examples are a guide as to how your project / event may contribute to a positive image of Council:

- - Enhancement of Council's corporate identity;
 - Increased opportunities for employment generation;
 - Supports the objectives of strategies of the Community Strategic Plan as well as Council's own programs;
 - Is accessible to a large number of people.

Criteria 2 - Community Development

Describe how your program / event builds on our local community.

The following examples are a guide as to how your project / event may build on our local community:

- - The project extends or diversifies knowledge or experience of cultural or artistic programs or skills of practitioners in the community and has the ability to attract new audiences;
 - The project / event observes good social practice and encourages community engagement;
 - The project / event will contribute to a vibrant cultural and community life for the City of Gosford and its community;
 - The project / event focuses on building and enhancing existing relationships at a local, regional and national level;
 - The project / event encourages key stakeholders to participate in important issues and initiatives.

Criteria 3 - Economic Value

Describe how your program / event builds on our local Economy.

The following examples are a guide as to how your project / event may build on our local economy:

- - The event / project encourages links between cultural, sporting, business, tourism and retail sectors;
 - The program increases returns on cultural, sporting or community infrastructure in the city;

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- The project has potential to provide Council with significant sponsorship benefits and/or to promote the city.

Organisational Capacity

Describe previous events / programs your organisation has developed and managed

List three personnel involved in the event / program and their skills

Do you have a business plan and marketing strategy for this event / program

- ☐ Yes
☐ No

If yes, please attach

Attach a file:

Describe how you know the program / event will be successful

E.g. previous evaluation, research, etc.

Project Budget

* indicates a required field

Total Project Cost *

\$

Must be a dollar amount

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Please specify what in-kind support you are requesting through this sponsorship application

Please provide an estimate as to what this request would equate to in dollar terms

\$
Must be a dollar amount

Are there other organisations / businesses providing sponsorship *

☐ No

☐ Yes

If Yes, please list

Attachments

Please attach the following documents prior to submitting your application

Organisations Certificate of Incorporation

Attach a file:

Current Certificate of Public Liability Insurance

Attach a file:

Latest Annual Financial Statement

Attach a file:

Additional Information required as part of your application

Attach a file:

Committee Approval

Please provide the date of the committee / board meeting at which this application was approved

Must be a date

