

If yes, please supply

Is your organisation registered for GST?

EVENTS SPONSORSHIP

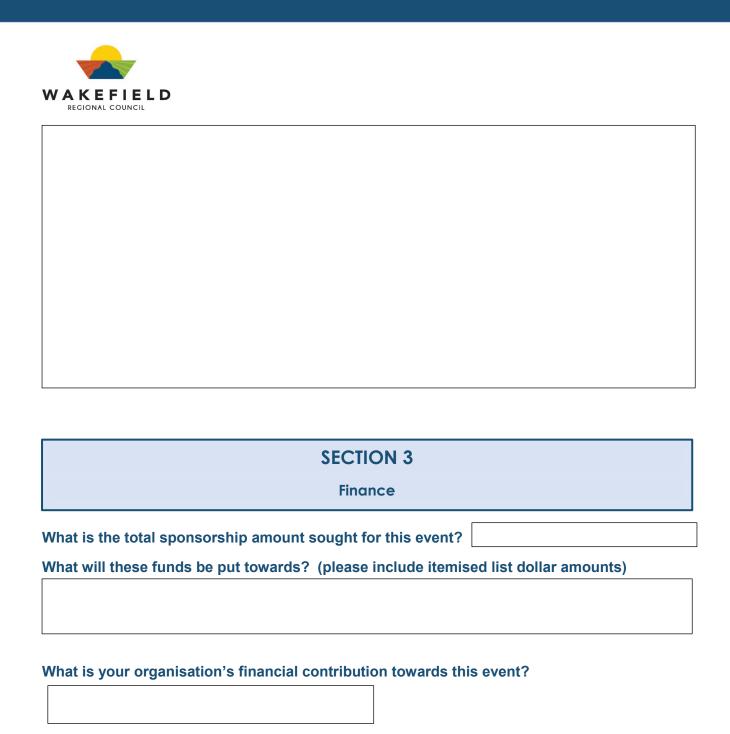
Events Sponsorships Up to \$500 for minor events. Up to \$2,000 for major events. Before you start: (please tick) Have you fully read and understood the relevant guidelines? Are you a Wakefield based not-for-profit community organisation? Are you able to demonstrate alignment to Wakefield 2030? ☐ Is your group covered by insurance? Has your organisation applied for the <u>required permits</u> associated with your event eg. Temporary food permit, event permit Is your event inclusive and accessible? Have you taken the current COVID restrictions into consideration? SECTION 1 **Organisation Details Applicant Organisation: Organisation Address: Contact Person:** Address (if different to above): Phone: Mobile: **Email:** Is the organisation a not-for profit community-based organisation? No Is the applicant organisation incorporated? Yes Does your organisation have an ABN? Yes

Yes

No



SECTION 2		
Event Details		
Please tick: Minor Event Major Event		
Title of the event:		
Brief description of the event:		
Date of event:		
Has your organisation engaged with the community about this event taking place?		
How will this sponsorship assist your organisation to provide a benefit to the community?		
Does this event provide low/no cost involvement?		
How will this activity be promoted and accessible to people with disability?		
Please outline how this event aligns to the Wakefield 2030 Community Plan – vision, themes, key strategies and/or priority actions		
Liveable Communities – activities that enhance the quality of life for our community. Thriving Region – activities that encourage economic growth and development. Sustainable Future – activities that support sustainability in the use of waste, water and energy, or promote and enhance the environment. Please explain alignment:		



What is your organisation's total in-kind contribution to this event? *

Event cost overall?

*Refer to guidelines for weighting and in-kind preferences.



SECTION 4		
Declaration		
Ihereby certify that I have been authorised to prepare and submit this application on behalf of the above-mentioned group or organisation and that the information contained in the application is true and correct to the best of my knowledge.		
Title: Given Name:	Family Name:	
Position held:		
Signature:	Date:	
Witnessed by (must also be an office bearer of the applicant organisation):		
Title: Given Name:	Family Name:	
Position held:		
Signature:	Date:	

For more information contact:
Community Events Officer
Wakefield Regional Council
PO Box 167
BALAKLAVA SA 5461