Event Grant Round 2

50% OF THE TOTAL COST OF THE EVENT UP TO \$5000

OPENING DATE: 1 FEBRUARY 2024 CLOSING DATE: 31 MARCH 2024

- 1. Please refer to the Community Grant Guidelines before completing this form.
- 2. If you have any questions regarding this application, please contact the Community Services & Social Development Team on 8366 9222.
- 3. Please note when completing the application form if there is insufficient space you may attach a separate page with the question number to provide the necessary details.

Submit a copy of your application, by either:

Post:

Community Grants

City of Campbelltown PO Box 1 Campbelltown SA 5074

In person:

Campbelltown City Council

172 Montacute Road ROSTREVOR SA 5073

Electronically:

mail@campbelltown.sa.gov.au



Section 1: About the	e Organisation		
Name of Organisation			
Contact person			
Postal Address			
Phone			
Mobile			
Email			
Is your Organisation inc	orporated?		
Yes	No (you m Guidelines	ust have an auspicing organisation see Grant))	
If you are not incorporated and are being auspiced, please provide details below.			
Name of Auspicing Orga	nisation		
Contact person			
Postal Address			
Phone			
Mobile			
Email			
ABN			
(Please provide a copy of	of the auspicing organisat	ion's Certificate of Incorporation)	
How is your Organisation	on funded? (tick all that a	pply)	
o Government grant		Membership fees	
 Fundraising 		Privately funded	
o Other			



Is your Organisation registered	for tax purposes?
Yes	No
ABN:	
Is your Organisation a non pro	fit organisation?
Yes	No
Describe the main purpose of y	your Organisation?
Number / percentage of memb	pers of your organisation who reside in the City of Campbelltown:
Previous sponsorship or grants	received from the Campbelltown City Council in the last 12 months?
Amount granted \$	
Date received	
Name of Event or Project	
Section 2: About the Even	t
Event title:	
Date of event:	
Location of event:	
	ants:
Total amount of the event: \$	



Is this	s a new or annual event?	
	New	Annual
Will y	ou be charging a fee?	
	Yes. How much?	No No
Have	there been any other effort	s made to secure sponsorship?
	Yes	No
If yes	, from who?	
Does	your event involve collabor	ation with Council or any other groups?
	Yes	No
If yes	, who?	
What	t is the main purpose of you	r event?
	Was a state of controller	
How grant		n, or the area itself benefit from your organisation receiving this



Section 3: Budget

Please provide budget details for the project which you are seeking Council support.

COSTS	DETAIL OF ITEM	AMOUNT
		\$
		\$
		\$
		\$
		\$
		\$
TOTAL COSTS		\$
INCOME	DETAIL OF ITEM (Fees, Membership, Other Grants, In kind donations)	
TOTAL INCOME		\$



Section 4: Signature

Campbelltown City Council reserves the right to publish details of the awarded grant and details to whom the grant was awarded to.

All the information stated within this application is, to the best of my knowledge, true and correct. I realise that, should this application be successful but I am unable to complete the project, then I am obliged to advise Campbelltown City Council to cancel the grant. I understand and agree to abide by the conditions as stated on this form and in the guidelines.

Signed:	Date: / /
Print na	me:
Check I	ist
Complet	e the checklist below before forwarding in your application
Have yo	u:
	Made sure your organisation is eligible to apply for a Grant - see Eligibility Criteria in Guidelines
	Included a copy of your organisation's Certificate of Incorporation (or the auspicing organisation).
	Included your organisation's most recent profit and loss statement and balance sheet (or the auspicing organisation).
	Completed all 4 sections of the application form.
	Signed the application form.
	Kept a copy of your application for future reference.

