Important Notes

* indicates a required field

Before submitting an application, please ensure you read Redland City Council's Redlands Coast Youth Week EOI Funding guidelines/ terms and conditions.

All applications will go through an assessment process. Successful applicants will be contacted within 14 days of the grant round closing.

If you have any enquiries or would like more information about eligibility or completing this form, please contact:

Community Development Team or Community Spaces Team.

Redland City Council

P: 07 3829 8999

E: youth@redland.qld.gov.au

Discounts and Waivers of Fees

To apply for discounts or fee waivers for a Temporary Entertainment Event Approval, Venue Hire or Traffic Permit, contact the relevant Council departments below. An application does not guarantee discounts or fee waivers. Please take this into consideration when developing the project, event or activity budget.

For more information regarding a Temporary Entertainment Event Approval, please contact Environment and Health Unit on (07) 3829 8999.

For more information regarding venue and/or hall hire, see <u>Halls and Venues</u>, or alternatively please contact Community Investment Team on (07) 3829 8999.

For more information regarding traffic permits, please see - <u>Permits and Licensing - Roads and marine</u>, or alternatively please contact Roads and Drainage Maintenance on (07) 3829 8999.

Consultation

	ave consulted with the Redland City Council Community Development Team d /or Community Spaces Team *
\circ	Yes
0	No
	ave read and understood the Redlands Coast Youth Week EOI Funding terms d conditions *
0	Yes
Ō	No

Applicant Details

<u>Terms & conditions</u> are displayed on the Redlands Coast Youth - Support and Activities page on the Redland City Council website. Please read prior to making your submission

* indicates a required field
Applicant Organisation Details
Organisation Full Legal / Incorporated Name * Organisation Name
Organisation Primary Address * Address
Suburb State Postcode Must beAddress Line 1, Suburb/Town, State/Province, and Postcode are required
Organisation Postal Address * Address
Suburb State Postcode
Must be an Australian postcode.
Organisation Phone Number
Must be an Australian phone number. e.g (07) 1234 5678
Organisation Primary Email *
Must be an email address. This must be the organisation's main (office) email address
Organisation / Project, Event, Activity Website *
Must be a URL.

Incorporation Number / Australian Company Number *
Does the organisation have an ABN? * ○ Yes ○ No
Organisation 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 <u>More information</u>
ACNC Registration
Tax Concessions
Main business location
Must be an ABN.
Attach a completed Statement by Supplier form Attach a file:
Required if Organisation does not have an ABN. Please refer to the Council's Grants webpage under "Helpful Forms' to download a <u>Statement by Supplier form</u>
Accountable Officer Contact Details
Please ensure this contact person is an authorised financial officer or financial delegate e.g. CEO, President or Chair
Contact Name * Title First Name Last Name
Position *

Office P	Phone Number *			
	an Australian phone 1234 5678	number.		
Mobile	Number *			
	an Australian phone 2 345 678	number.		
Email *				
Must he	an email address.			
		itsource the op	eration of the pro	ject, event or a
	enter the contac	ct details of the	norson who will	ho managing tl
event o	or activity.		person who will i	be managing ti
Contact Title	-	Last Name	person who will	be managing tr
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Contact Title Mobile Must be a e.g 0412 Phone	Number Australian phone 345 678	Last Name number.	person who will	be managing tr
Contact Title Mobile Must be a e.g 0412 Phone	Number An Australian phone 345 678 Number An Australian phone an Australian phone	Last Name number.	person who will	be managing tr
Mobile Must be a e.g 0412 Phone Must be a e.g. (07)	Number An Australian phone 345 678 Number An Australian phone an Australian phone	Last Name number.	person who will	be managing tr

Funding Options

* indicates a required field

Monetary Funding

1. Please indicate the level of funding being applied for. *

 \$2,000 Less than \$2,000 Please note that if the funding program is oversubscribed, successful applicants may not receive the full amount requested.
Please specify amount (if applying for less than \$2,000)
\$
Must be a dollar amount.
2. Please note that your activity will be advertised through Redland City Council's social channels * □ agree
Project Details
* indicates a required field
3. Name of the proposed project, event or activity *
4. What is the type of project, event or activity? *Community EventOther:
5. Provide a short description of the project, event or activity *
Word count:
Must be no more than 500 words.
6. Start Date *
Must be a date no earlier than 5/04/2025
7. End Date *
Must be a date no later than the 13/04/2025
8. Project, event or activity location * Address
Include the address, suburb and postcode. Project or activities on Quandamooka Country may require

specific consultation. Contact the Community Development Team on (07) 3829 8999 for advice.

9. Is it occurring on land owned or managed by Council or a third party? *YesNo
10. Please provide written consent from the land owner / manager Attach a file:
eg park booking, venue booking
 12. Estimated number of attendees * 0-20 people 20-50 people 50+ people
Target audience ☐ Age group 12-17 ☐ Age group 18-24
 13. Is the project, event or activity ticketed? * Yes No Event or activity must be free and not a chargable activity.
14. Describe how you will evaluate the success of the project, event or activity. What methods will be used? *
15. Please provide a Project Plan or Event Management Plan * Attach a file:
An <u>Event Plan Templates</u> can be found under 'Event Organisers' on Council's Redlands Coast Event Planning webpage.
16. How will this event or activity build capacity for your organisation? *
Word count: Must be no more than 500 words.

Budget

* indicates a required field

Funding

17. Total Amount Requested *

\$

Must be a dollar amount and can be no more than \$2,000. This is the total financial support being requested from Council in this application. This amount is GST exclusive.

18. Total cost of project, event or activity *

\$

This is the total budgeted cost (dollars) of the initiative and includes all other grants and contributions. If using a Council park for the event or activity - include the cost of the park booking in your budget.

Budget

Applicants must provide an itemised budget for the project, event or activity including all income, expenditure and in-kind costs.

Applicants that are applying for funding amount to support multiple events, need to demonstrate a breakdown of the amount requested specific to each event.

19. Please provide an itemised budget *

Attach a file:

Budget should include details of other funding that has been confirmed and/or applied for including cash and in-kind contributions.

Certification

* indicates a required field

To be acknowledged by the Accountable Officer of the application.

I certify that to the best of my knowledge the statements made in this application are true.

I consent to the information contained within this application being disclosed to or by Redland City Council for the purpose of assessing, administering, monitoring and reporting current and any future Redland City Council applications.

- I understand that if Redland City Council approves the funding, I will be bound by the contents of my application to carry out my project, event or activity as I have described and my application will form part of my contractual agreement with Redland City Council.
- I understand that if the Redland City Council approves funding, I will be required to accept the terms and conditions of the funding in accordance with Redland City Council's contractual agreement.

*

○ I agree
I certify to the best of my knowledge that the statements made in this application are true. $*$
Please provide your full name (and position title if applicable)
Information Privacy Act 2009
Redland City Council is collecting your personal information in order to process this application. Your participation is voluntary. The information will only be used by authorised Council Officers for the purpose of sponsorship and ensuring our records are accurate. Your information will not be given to any other person or agency unless you have given us permission or we are required by law to do so.
Mandatory and Supporting Material
Last audited financial statement or annual Treasurer's report. * Attach a file:
Public liability covering the project, event or activity date. * Attach a file:
Please attach a copy of your current Public Liability Certificate
Additional information in support of the initiative. Attach a file:
eg: Letters of Support