

Activate Application Form 2025

Form Preview

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 [Halls and Venues](#), or alternatively please contact Community Investment Team on (07) 3829 8999.

For more information regarding traffic permits, please see - [Permits and Licensing - Roads and marine](#), or alternatively please contact Roads and Drainage Maintenance on (07) 3829 8999.

Consultation

I have consulted with the Redland City Council Community Development Team and /or Community Spaces Team *

- Yes
- No

I have read and understood the Redlands Coast Youth Week EOI Funding terms and conditions *

- Yes
- No

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[Terms & conditions](#) are displayed on the Redlands Coast Youth - Support and Activities page on the Redland City Council website. Please read prior to making your submission

Applicant Details

* indicates a required field

Applicant Organisation Details

Organisation Full Legal / Incorporated Name *

Organisation Name

Organisation Primary Address *

Address

Suburb State Postcode

Must be Address 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.

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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	More information
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 [Statement by Supplier form](#)

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
<input type="text"/>	<input type="text"/>	<input type="text"/>

Position *

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Office Phone Number *

Must be an Australian phone number.
e.g (07) 1234 5678

Mobile Number *

Must be an Australian phone number.
e.g. 0412 345 678

Email *

Must be an email address.

Are you intending to outsource the operation of the project, event or activity? *

- Yes
 No

Please enter the contact details of the person who will be managing the project, event or activity.

Contact Name

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Mobile Number

Must be an Australian phone number.
e.g 0412 345 678

Phone Number

Must be an Australian phone number.
e.g. (07) 1234 5678

Email

Must be an email address.

Funding Options

* indicates a required field

Monetary Funding

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

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- \$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 *

- I 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 Event Other:

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.

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9. Is it occurring on land owned or managed by Council or a third party? *

- Yes
- No

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 chargeable 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 [Event Plan Templates](#) 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

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* 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.

*

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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