

Youth National and International Sports Donation

Form Preview

Individual Donation Application Form

* indicates a required field

Privacy - Use of disclosure of personal information

Any personal information we collect through victoriapark.wa.gov.au may be used or disclosed for the primary purpose for which it was collected, for example to allow us to answer your enquiry or process your transaction.

Personal information will be dealt with in accordance with the applicable legislation in Western Australia and consistent with any legal obligation.

To view our privacy statement go to victoriapark.wa.gov.au

Applicant Information

Before completing this application form, you should have read the individual donation [guidelines](#) and [Policy 114](#).

Incomplete applications and/or applications received after the closing date will not be considered.

This section of the application form is designed to help you, and us, understand if you are eligible for this donation. It's crucial that you complete these questions before any others to ensure you do not waste your time applying for an unsuitable grant.

Please note to be eligible for the donation program you need to be a local resident of the Town and be aged between 12-25 years of age.

If you have any questions in regards to these eligibility criteria, please contact the grants officer on 9311 8111 or admin@vicpark.wa.gov.au

Confirmation of Eligibility

I confirm that the applicant ...

- has read and understands the individual donations program guidelines and Policy 114
- resides in the Town of Victoria Park
- aged between 12-25 years of age
- Is not an Elected member, staff of the Town, or their immediate family members
- produces a letter of selection from their State Sporting Association or National Body

Please select below: *

☐ Yes ☐ No

You must confirm that all statements above are true and correct.

Category and level of assistance

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Sport

- ☐ State travel (up to \$200 exc GST) ☐ International travel (up to \$300 exc GST)

Event

Name of event *

Event dates *

Place of event *

Sport/activity type *

Category *

- ☐ Junior ☐ Senior ☐ Open

What are your objectives of your participation in the event? *

What will the event involve? *

If your application is successful, how will you acknowledge the contribution of the Town? *

- ☐ Written letter to the Town of Victoria Park and receipt of donation expenditure ☐ Written speech of acknowledgement and receipt of donation expenditure

How many other individuals in the Town from your Club/group have been selected for the same events? *

Contact Details

Applicant Details

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Name of applicant**Applicant under 18 years (If so please fill in Parent/Guardian name below)**

- ☐ Yes
☐ No

Parent/Guardian name**Are you aged between 12 and 25 years?**

- ☐ Yes ☐ No

Please attach birth certificate

Attach a file:

You are not eligible if you are under 12 years or over 25 years

Address**Suburb****Postcode****Postal address****Contact Numbers (Office and Mobile)****Email**

Tax information

* indicates a required field

Do you have an ABN? *

- ☐ Yes ☐ No

If yes, please supply your ABN. If you are not registered please supply a Statement by Supplier form

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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

As you do not have an ABN, please submit a completed ATO Statement by a Supplier Form with your application, otherwise 48.5% of any approved donation may be withheld. Download the form from [the ATO](#).

Please upload completed Statement of Supplier Form:

Attach a file:

Max 25mb

Are you registered for GST?

☐ Yes ☐ No

Note: It is a requirement that an invoice (inclusive of GST if applicable) is supplied to the Town should the donation application be successful.

Budget

Budget information

Please supply a breakdown of the proposed income and expenditure for the project (ex. GST). Include additional categories that you consider relevant to your project in the table below. The Town must be advised of any variations to information supplied in this application.

Total Amount Requested

\$

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What is the total financial support you are requesting in this application?

Total Project/Program Cost

\$

What is the total budgeted cost (dollars) of your project?

Budget (GST exclusive)

Please outline your project budget in the income and expenditure tables below, including details of other funding that you have applied for, whether it has been confirmed or not. All amounts should be GST exclusive.

Provide clear descriptions for each budget item in the 'Income' and 'Expenditure' columns. Examples of income could include 'council community grant', 'trivia fundraising night', 'company X sponsorship'. Examples of expenses could include 'onsite power & water for 6 months', 'office supplies', 'part-time staffer x 40 hours'.

Use the 'Notes' column for any additional information you think we should be aware of.

Your budget **MUST** balance (TOTAL INCOME AMOUNT = TOTAL EXPENDITURE AMOUNT). Please **do not add commas** to figures – e.g. type \$1000 not \$1,000 – this will ensure your figures for each table total correctly.

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Income Description	Income Type	Confirmed Funding?	Income Amount (\$)	Notes
			\$	
			\$	
			\$	
			\$	
Please add your applicants contribution. Town of Victoria Park's donation amount. Grants and sponsorship (please list sources)				

Expenditure Description	Expenditure Type	Expenditure Amount (\$)	Notes
		\$	
		\$	
		\$	
		\$	
Please list airfare, uniform, accommodation and other (e.g.			

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competition entry fees, equipment).			
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Budget Totals

Total Income Amount

This number/amount is calculated.

Total Expenditure Amount

This number/amount is calculated.

Income - Expenditure

This number/amount is calculated.

Certification, Endorsement and Feedback

* indicates a required field

Statutory Declaration A

I, the Applicant, certify that the information provided in the individuals - Donation Application is correct and agree to abide by the conditions outlined in the donation applications guidelines.

Name of authorised person *

Title

First Name

Last Name

Date *

Must be a date

Statutory Declaration B

I the Parent/Guardian, of the Applicant under the age of 18 years understand that if the Town approves the application, my child'/charge will abide by the donation conditions.

Name

Title

First Name

Last Name

Date

Must be a date.

Endorsement

This section is to be completed by the relevant governing body of the sport or the umbrella organisation supporting the activity.

I certify that the information contained in this application is correct and the applicant/s has been selected to represent an official Western Australia or Australian team.

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Name

First Name

Last Name

Position

Address

Address

Date

Must be a date.

Phone Number

Must be an Australian phone number.

Email

Must be an email address.

Signature

Letter of endorsement

Attach a file:

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

Please indicate how you found the online application process:

☐ Very easy ☐ Easy ☐ Neutral ☐ Difficult ☐ Very difficult

How many minutes in total did it take you to complete this application? *

Estimate in minutes i.e. 1 hour = 60

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.

