

2024/25 Grants for the Community Program - Athletes Application Form

Form Preview

GRANTS FOR THE COMMUNITY - INDIVIDUAL ATHLETE APPLICATION

Applications from individuals or athletes/sporting groups who are formally endorsed by their sport's governing body, a club or other incorporated body will be considered for funding under Council's Grants for the Community Program.

Individuals may receive up to **\$500** towards their involvement in their chosen sport or interest. Groups or teams attending the same event can apply for a group total of up to **\$2,000 (excl GST)**.

Applications should clearly demonstrate that the individual/group is unable to self-fund and that his/her personal circumstances indicate that additional assistance is required. *All information on the individual will be treated in confidence.* A recognised sports governing body, Club or other Incorporated body **MUST** agree to formally auspice the grant. Please note: Funds will **NOT** be given directly to an individual. The auspicings body will be required to manage all grant funds on behalf of the applicant.

Projects that do not fit into any of the above funding areas may still be considered. If you are uncertain as to whether your project meets the funding criteria, please contact the Community Projects Officer via grants@willoughby.nsw.gov.au or on 9777 7982 for assistance.

WHO CAN APPLY

- Permanent Residents of the Willoughby Local Government Area
- Applicants must be between the ages of 10 – 25 years.
- People who attend school within the Willoughby Local Government Area
- Members of clubs or associations etc. that are located within the Willoughby Local Government Area.
- Individuals must be selected by a recognised national governing body or equivalent and provide a letter of selection.

Representation may be in the form of:

- Performing
- Competing
- Presenting

Funding will assist with expenses incurred whilst attending an activity e.g. travel, accommodation, entry fee and registration.

WHO CANNOT APPLY

- Individuals/groups that are not auspicied by an incorporated body/club/association
- Individuals who were funded in any of the three previous grant rounds
- Applicants that are in a position to self fund their project
- Applicants who have failed to comply with previous funding requirements
- Applicants with considerable opportunity to access funding from other sources
- Council staff. Family members of Council staff can apply if they otherwise meet all of the criteria.

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ABOUT THE ATHLETE/INDIVIDUAL

* indicates a required field

New Section

Applicant

☐ Individual ☐ Organisation

Organisation Name

Title

First Name

Last Name

Residential Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Phone Number *

Must be an Australian phone number.

Email *

Must be an email address.

Website

Must be a URL.

Individual's - Date of Birth

Have you or any applicants received an Individual/Sports grant from Willoughby City Council in the past 5 years? *

☐ Yes

☐ No

Applicants who have received funding from Council for three (3) grant rounds for the same project are NOT eligible to re-apply.

If yes, to receiving a grant within the last 3 years please specify details and year the grant was received.

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**If an organisation:
please list applicants,
their chosen sport and
date of birth**

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**Name of Parents/
Guardians (if applicant
is under 18 years)**

Title	First Name	Last Name

**Name of Parents/
Guardians (if applicant
is under 18 years)**

Title	First Name	Last Name

**Name of Parents/
Guardians (if applicant
is under 18 years)**

Title	First Name	Last Name

**Name of Parents/
Guardians (if applicant
is under 18 years)**

Title	First Name	Last Name

YOUR REQUEST

* indicates a required field

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**What is the applicant/
s chosen sport or
interest? ***

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**Please provide
information that
demonstrates the
applicant/s ability or
level of interest in
their chosen pursuit or
interest ***

--

**Please explain how you
might contribute to
COVID-19 recovery and
if it aligns with Council's
Community Strategic
Plan (CSP) priorities:
(hyperlink below)**

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View: <https://www.willoughby.nsw.gov.au/Community/Planning-for-our-Future/Our-Future-Willoughby-2028>

**At what level is the
applicant/s involved in
their sport/interest? ***

- ☐ Regional
☐ State
☐ National
☐ International

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Does the applicant/s actively support or encourage other people to participate in the relevant sport or interest? *

☐ Yes

☐ No

If 'Yes', how does the applicant/s support and encourage the involvement of other people?

For what specific purpose is funding currently being sought from Willoughby Council? *

What will grant funding be spent on? (e.g. equipment, fares, accommodation, uniforms, registration, enrolment)

FINANCES

What is the total cost of the applicant/s participation in the specific activity for which funds are sought? *

What has the applicant/s done to earn or raise funds to contribute to their participation in this event/activity?

e.g. part-time work, fund raising etc. If the applicant has sought funds from other grant programs please indicate \$ amounts and whether or not the funding has been approved. If waiting on an outcome please advise of timeframes.

What \$ amount is being sought from Willoughby Council *

Please indicate a specific \$ amount

Is the applicant/s willing to accept part-funding?

☐ Yes

☐ No

Please provide a budget for the specific activity/event for which funds are sought

Income Description \$

**Expenditure
Description**

\$

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SPECIAL CIRCUMSTANCES

Please indicate why you require financial assistance from Willoughby City Council.

*

Does the applicant/s live with a diagnosed or recognised special need (such as an intellectual or physical disability, an illness or a mobility issue)?

☐ Yes

☐ No

Does the applicant/s have an immediate background of social, cultural or economic disadvantage?

☐ Yes

☐ No

Please attach any support documentation here.

Attach a file:

ABOUT THE AUSPICE ORGANISATION

* indicates a required field

What is an Auspice Organisation?

An auspice is an organisation who manages grant funding on your behalf.

For the Athletic grant applications, a recognised sport's governing body, Club or other Incorporated body **MUST** agree to formally auspice the grant.

Please note: Funds will **NOT** be given directly to an individual. The auspicings body will be required to manage all grant funds on behalf of the applicant.

What is the name of the Auspice Organisation? *

Please upload a copy of the Auspice Body's Certificate of Incorporation. *

Attach a file:

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Auspice's 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.

Is the Auspice Organisation registered for GST? *

☐ Yes

☐ NO

Does the Auspice Organisation hold current Public Liability Insurance of \$10 million *

☐ Yes

☐ No

Please upload a copy of the Auspice Organisation's Certificate of Currency (Insurance). *

Attach a file:

Please upload any letters of endorsement of the applicant from the auspice organisation

Attach a file:

Financial or In Kind Support from Auspice Organisation

Will the Auspice Organisation provide ANY financial or in-kind support to the applicant/s for their involvement in the proposed event/activity? *

☐ Yes

☐ No

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If 'Yes' please provide an overview of the support provided.

Contact Points for Auspice Organisation

What is the name of the Primary Contact person at the Auspice Organisation? *

Title

First Name

Last Name

Auspice Contact Phone No.

Please provide the best phone contact for Council to contact the auspice organisation

Auspice Organisation's Postal Address *

Address

Suburb

State

Postcode

Auspice's Contact Email *

Auspice Organisation's Website

Please upload a letter of support from the Auspice organisation

Attach a file:

You will need a letter from the Auspice organisation stating they agree to Auspice your organisation/project.

PERMISSION, CHECKLIST & DECLARATION

* indicates a required field

Permission

Please read and answer the following:

I give permission for Willoughby City Council to send me emails regarding the Grants for the Community Program. *

- ☐ Yes
☐ No

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I agree to participate in a yearly survey for the Grants for the Community Program. *

- ☐ Yes
☐ No

I give permission for Willoughby City Council to use any project information included in this application form. *

- ☐ Yes
☐ No

(Uses may include promotion of project on our website and in newsletters).

Checklist

I have read and understood the Small Grants Program Guidelines for Individual/Sports Applications *

- ☐ Yes

I agree to the requirements outlined in the Small Grants Program Guidelines for Individual/Sports applicants. *

- ☐ Yes

I have discussed this project with the relevant Council officer(s) and am confident that it complies with the Guidelines *

- ☐ Yes

I have attached

- ☐ Letter of Endorsement from the auspice organisation
☐ A copy of the auspice organisation's Certificate of Currency (Public Liability Insurance)
☐ A copy of the auspice organisation's Certificate of Incorporation
☐ Other support documentation
☐ Other:

It is ESSENTIAL that you provide this information. If you are unable to attach the documentation with the application please contact Council on 9777 7982 or email grants@willoughby.nsw.gov.au to discuss.

Declaration

I declare that the information provided in this application is true and correct. I understand that Council has the right to reject this application if it is found to contain false or misleading information.

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Note: Completion of the fields below is equivalent to supply of a Signature of Authorisation. If the grant is to be managed by an Auspice Organisation, the name and position provided in the Signatory box below MUST be those of an authorised representative of the Auspice Organisation.

Applicant / Organisation's Name

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Signatory's Name *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Position in Auspice Organisation *

Note to Applicants: After completing the Application you can review the fields before you hit the "SUBMIT" button.

To submit the application, you MUST click on the "SUBMIT" button located below or above on the top right hand side of the screen. A confirmation email indicating the application has been received will be sent to the email address you have nominated along with a PDF copy of your application. IF YOU DO NOT RECEIVE A CONFIRMATION EMAIL YOU HAVE NOT SUBMITTED YOUR APPLICATION. You will not be able to amend the contents of the application after you have properly submitted it to Council.