

Community Events Grant Applications 2024-25

About this form

Please read the program guidelines before you start the application form.

All event applications must be submitted on-line. If you require assistance with the online form or have questions about the application form, please contact the Events Team on 53829777 or by email events@hrcc.vic.gov.au.

You can save your progress on this form at anytime and complete later via an email link. You will receive this link after you have started and saved your work for the first time (please ensure your email address is correct on the form to allow this to happen)

The necessary templates and attachments required to complete the application can be found at <https://www.hrcc.vic.gov.au/Our-Services/Grant-information/Community-Grants-Program>.

Applicant details

Name of the community organisation undertaking the event Required

Postal address of the organisation undertaking the event Required

Contact person for the organisation Required

Phone Required

Email Required

If your organisation is not incorporated you will require a not-for-profit auspice organisation to manage your grant

Do you require an auspice organisation? (Select 1 option) Required

- Yes
- No

Answer this question if you selected 'Yes' in *Applicant details > Do you require an auspice organisation?*

Name of the not-for profit auspice organisation managing the project Required


Answer this question if you selected 'Yes' in *Applicant details > Do you require an auspice organisation?*

Postal address of the not-for-profit auspice organisation managing the project Required

Answer this question if you selected 'Yes' in *Applicant details > Do you require an auspice organisation?*

Attach signed Auspice Agreement

If you require an Auspice organisation, please download the agreement template, complete and upload here

 Please attach all files to the end of this form before submitting it.

If successful payment of Grant to be deposited into the following bank account (auspice if applicable)

Account name Required

BSB No. Required

Account No. Required

Does your organisation (or auspice organisation) have an Australian Business Number (ABN)? (Select 1 option)

Required

- Yes
- No

This information applies if you selected 'No' in *Applicant details > Does your organisation (or auspice organisation) have an Australian Business Number (ABN)?*

If you do not have an ABN - You need to complete a 'Statement by Supplier' form and submit it with your application. Form available from the ATO <https://www.ato.gov.au/forms/statement-by-a-supplier-not-quoting-an-abn/>

Note: Failure to provide either an ABN or statement by supplier will result in Council being obliged to withhold 46.5% of the grant allocation (if successful)

Answer this question if you selected 'No' in *Applicant details > Does your organisation (or auspice organisation) have an Australian Business Number (ABN)?*

Attach statement by supplier form



Please attach all files to the end of this form before submitting it.

Answer this question if you selected 'Yes' in *Applicant details > Does your organisation (or auspice organisation) have an Australian Business Number (ABN)?*

Your organisation's ABN Required

Please identify your GST Tax status (Select 1 option) Required

- Registered for GST
- Not registered for GST


If your organisation (or auspice) is registered for GST, your project budget and funding will exclude GST

Confirm that your organisation (or auspice) has Public Liability Insurance (Select 1 or more options)

Organisations or auspices must have Public Liability Insurance to be eligible for Council grants.

Yes Public Liability Insurance is in place **Required**

Attach copy of Public Liability Insurance **Required**

 Please attach all files to the end of this form before submitting it.

Event Details

Confirm your event is in the Horsham Rural City Council municipality (Select 1 or more options) **Required**

Yes **Required**

Event title **Required**

Event description **Required**

Does your event specifically support the inclusion of people that experience barriers to participation? (Select 1 option)

Yes

No

Answer this question if you selected 'Yes' in *Event Details > Does your event specifically support the inclusion of people that experience barriers to participation?*

Tell us how your event specifically targets the inclusion of people that experience barriers?

Event location Required

Is the event taking place on (Select 1 option) Required

- Council land
- Crown land
- Private land

If your event is taking place on Council owned land or Crown Land, you must complete the Intention to hold an event form and attach below.

Council's Events Team can assist you to complete this form and can also help you seek Council or Crown Land consent as required. For assistance, please contact 53829777 or email events@hrcc.vic.gov.au.

If your event is taking place on private land, but you required Council services to support your event (i.e. waste collection or road management), you will also need to complete the Intention to hold an event form and attach below.

Attach copy of the Intention to hold an event form



Please attach all files to the end of this form before submitting it.

Planned event start date Required

- Must be between 01 July 2024 and 31 December 2025

D	D	M	M	Y	Y	Y	Y
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Planned event finish date Required

- Must be between 01 July 2024 and 31 December 2025

D	D	M	M	Y	Y	Y	Y
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Number of people to participate in the event Required

Target age groups of participants (Select 1 or more options) Required

- 65+
- 35-64
- 15-34
- 0-14

Assessment Criteria

Which of the following Event program objectives does your project support (select all that apply): (Select at least 1 option) Required

- Event aligns with HRCC Council Plan
- Increases the range of diverse, inclusive and vibrant events
- Demonstrates social benefits that support our community
- Increases economic stimulus through event attendance
- Delivers participation opportunities for our community
- Other

Please list any other priorities

How will your event benefit the community? Required

What are the social benefits? Is the event culturally inclusive? How does the event support volunteerism?

What are the economic benefits flowing from the event? Required

How will the event generate increased expenditure in our local economy? Where will participants come from? Will the event provide opportunities for local service clubs or businesses to be involved?

Explain your organisation's experience and skills to manage and deliver the event?

What risks have you identified for your event (if any) and how will you decrease the risk?

Event Budget

What is the grant amount requested from Council? Required

The grant amount requested in this application may be reduced. Should the grant amount be reduced, please indicate the minimum amount of grant that would allow the event to proceed Required


Is this a 'one-off' event or do you plan to run similar events in the future? (Select 1 option)

- One-off event
- Plan to hold similar events in the future


Answer this question if you selected 'Plan to hold similar events in the future' in *Event Budget > Is this a 'one-off' event or do you plan to run similar events in the future?*

What strategies does your organisation have to support the financial sustainability of the event without ongoing Council funding?


Attach event budget (using Council template)

 Please attach all files to the end of this form before submitting it.

If your cash contribution is greater than \$5000, please attach a copy of your organisation's latest annual financial report.

 Please attach all files to the end of this form before submitting it.

Attach quotations for all budget items greater than \$1000 For each expenditure item greater than \$1000

 Please attach all files to the end of this form before submitting it.

Authorisation

I affirm that: (Select 1 or more options) Required

- I have read the guidelines Required
- All details supplied in this application and attachments are true and correct to the best of my knowledge Required
- The application form has been submitted with the authorisation of the applicant organisation Required
- A signed auspice agreement has been attached (if required) Required
- The applicant (or auspice) has Public Liability Insurance Required
- The project is based in Horsham municipality Required
- The grant funds (if successful) will be used to deliver the project as detailed in this application Required
- A Community Grant Project Completion Report will be submitted to Council as soon as the project is complete Required

Signature Required

Name of authorised applicant representative

Title of authorised applicant representative (must be Chairperson/President/Secretary/Treasurer)

End of form

Don't forget to attach all files before submitting this form