



**Council Donation
Application Form**

Part 1 Applicant Information

1. Name of Group/Organisation/Individual: Melanie Grage
Street Address: 86 McLennan St Quairading WA 6383
Postal Address: 86 McLennan St Quairading WA 6383
Mobile Number: 0488768251

2. Contact Person: Nicole Grage
Position: Mother
Street Address: 86 McLennan St Quairading WA 6383
Postal Address: As above.
Mobile Number: 0474997576
Email: abookpost@gmail.com.

3. If successful, the payment is to be made out to: Melanie Grage

4. Applicant Type (please tick the appropriate box):

- Sporting Club
- Community Group
- Church
- School
- Other: CDHS Student.

5. Is your group or organisation based in the Shire of Cunderdin? (Please tick)

- Yes
- No

6. What percentage of your group or organisation's members live within the Shire of Cunderdin?

0%

7. What is the purpose of your group/organisation?

Fundraising for WA state AFLW expenses.

8. Is your group incorporated? (Does it have a constitution or registered Business Name?)

- Yes
 No

9. Does your organisation have an Australian Business Number (ABN)?

- Yes, ABN _____
 No

10. Is your organisation registered for GST?

- Yes
 No

11. Has your group received a grant/sponsorship from the Shire of Cunderdin before?

- Yes
 No

If yes, when did you last receive this grant? _____

If yes, was the previous grant acquitted? _____

Part 2 Project Information

13. Briefly describe your project/event program which funding is sought for:

Fundraising for the SSWA 15 girls state AFL girls team.

14. Date, time & length of program/event:

21st - 30th of July 2023.

15. Location of event/project:

Ballarat, Victoria.

16. Type of event (please tick the appropriate box)

- Community project
- Community event/festivals
- Community Sporting event
- Other: WA state representation.

17. What is the purpose of the event or project?

18. How will this event of project benefit the community?

Recognition of Cunderdin District High School student achievement.

Please add any additional information which you feel may demonstrate how your project or event will contribute to the strengthening of a sense of community within the Shire of Cunderdin.

CDHS teacher encouraged me to try out for this team. Previously I had played junior football for Cunderdin until I was an age where I could not played mixed football. I will be representing CDHS and the community.

Part 3 Budget Information

19. Proposed Budget – please show the total budget for the project:

INCOME	
Request from Council (Shire of Cunderdin)	\$ At Council discretion
Group/Organisation Contribution:	\$
Other: Fundraising	\$ TBC
Other:	\$
Other:	\$
Total Income:	\$
EXPENDITURE	
Item A: Airfares	\$ 1100.00
Item B: Accommodation	\$ 2100.00
Item C: uniform	\$ 600.00
Fees, Levies and misc	\$ 1000.00
Total Expenditure	\$ 4800.00

Thank you for your time in applying to this fund. Further information may be obtained from the Community Development Officer. Please post or email completed application to the Community Development Officer, Shire of Cunderdin PO Box 100 Cunderdin WA 6407 or Attn: Community Development Officer to admin@cunderdin.wa.gov.au.



SHIRE OF
CUNDERDIN

Council Donations

Terms and Conditions of Grant Acceptance

We the undersigned accept the funding support offer from the Shire of Cunderdin and agree to abide by the following Terms and Conditions:

1. To use the grant for the purpose specified in the donation recipient's funding submission and according to the funding submission budget.
2. Accept full liability for the event/project and ensure safety and emergency strategies are in place in the event/project that an incident occurs.
3. Acknowledge the Shire of Cunderdin's contribution –
For events – inclusion of logo in all event advertising and publications
For infrastructure projects – inclusion of signage with logo in recognition of Council's donation
4. To acquit the grant by providing the Shire of Cunderdin with a completed Donation Report Form referring detailing expenditure of funds within three months of completion of the project. Include non-financial information (such as photographs/press cuttings).
5. The Donation Report Form will have copies of receipts/tax invoices for all expenditure, attached to the Shire's records.
6. To return any unexpended funds to the Shire of Cunderdin within one (1) month of the event project being completed, unless otherwise agreed in writing by the Shire of Cunderdin.

The Terms and Conditions of Donation Acceptance are to be signed by the group or organisations current President, Treasurer or 2 other senior office bearers with authority to sign this agreement.

Organisation: _____

1. Name: Melanie Grage.

Position: Applicant

Signature:  mg Date: 23/05/23

Mobile number: 0488 768 251

Email: Qbookpost@gmail.com.

2. Name: _____

Position: _____

Signature: _____ Date: _____

Mobile number: _____

Email: _____