

# Community Event Development Application 2024/2025

## Form Preview

## Community Event Development Fund

### Introduction

Community events are an important factor in contributing to the Port Stephens cultural identity. They reflect our values, the sense of place and provide a platform for our community to connect and come together.

This funding program will focus on events that create social outcomes for the Port Stephens community. Applications will be assessed on how they bring people together to celebrate, learn, share experiences and grow new opportunities.

### Program Description

This funding stream is designed to support the delivery of events that create social connections, improve the liveability and wellbeing of our residents and contribute to the social and cultural identity of our community.

This support may be financial, strategic or a combination of both. The funding stream is designed to be seed funding to start events, ensure the long term sustainability and provide financial support of community based events.

For more information on eligibility and assessment for this fund and for further information for all our grant and sponsorship funds please refer to our [Community Funding Guidelines](#)

PLEASE NOTES: If you are successful in this application you will still need to follow the normal events approval process.

### Key Dates

Applications are open all year round from 30 July 2024 to 30 June 2025.

### Funding available

A total pool of \$50,000 is available for this stream. A maximum of \$3,000 in cash or in-kind is available per applicant.

### Who can apply

- Incorporated, not for profit organisations or charities
- Registered Businesses with ABN
- Sole Traders
- Schools

## Application Contact Details

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\* indicates a required field

### Applicant Details

#### Applicant \*

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

#### Applicant Position (if applying on behalf of organisation) \*

#### Applicant Primary Address \*

Address

  

#### Applicant Primary Phone Number \*

Must be an Australian phone number.

#### Applicant Primary Email \*

Must be an email address.

### Organisation Details

#### Organisation Name

Organisation Name

#### ABN (if applicable)

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	<a href="#">More information</a>
ACNC Registration	

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Tax Concessions

Main business location

Must be an ABN.

### Organisation Primary Address

Address

  

### Organisation Primary Phone Number

Must be an Australian phone number.

### Organisation Primary Email

Must be an email address.

### Organisation Primary Website

Must be a URL.

### Organisation details (eg not for profit, community group)

## Event Description

\* indicates a required field

### Event Description

#### Name of event \*

#### Short event description \*

Provide a short description (100 words recommended) of your event - what are you out to do?

#### Event start date \*

Must be a date.

#### Event end date \*

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Must be a date.

### Event Location

**Where do you plan to hold your event? \***

**What is this space currently used for? \***

**Is the location on public land or privately owned land? \***

- Public
- Private

**Do you have landowners consent? \***

- Yes
- No

Either private landowner consent or Council consent is required. Please note additional approvals may be required eg. event application

If landowners consent has not yet been obtained, this will have to be provided prior to the project starting.

### Event Financial Details

**Funding request \***

\$

Must be a dollar amount and no more than 3000.

**Other support requested (if any)**

Note: support in this fund may be financial, strategic or a combination of both

**Has your organisation or group received a Port Stephens Council grant and/or donation within the last 3 years? \***

- Yes
- No
- Unsure

Please note all previous grants must be acquitted prior to allocating further funding

**Has your organisation made an application for financial assistance from other council funding streams for this project/event, including Councillor/Mayor support? \***

- Yes
- No

**Does your event/project charge a fee to enter or participate? If so how much?**

## Event Alignment

\* indicates a required field

### Event Alignment to Funding Criteria

**1. Briefly describe how your event will contribute to the local identity and culture of the town and/or Port Stephens \***

**2. Who will you be working with and how will this event benefit the community? \***

**How do you see your event/project growing in the future? \***

## Event Details

\* indicates a required field

**Briefly outline what marketing you will undertake to create awareness of this event and your target audience \***

**Are there any additional approvals that you may need to obtain for this project? \***

- Yes
- No
- Unsure

**Please list any additional approvals required**

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### Supporting Documentation

\* indicates a required field

#### Insurance

**Do you have Public Liability Insurance to cover your event? \***

- Yes
- Not yet

Applicants must supply a Certificate of Currency for a minimum of \$20 million Public Liability Insurance listing Port Stephens Council as an interested party

**Please upload the applicable Public Liability Insurance**

Attach a file:

#### Budget

**If you have a completed budget, please upload below.**

Attach a file:

Include and itemised list all expenditure for event including funds that may not be covered by grant

If you have not attached a budget above, please complete your budget below

Expenditure	\$
Eg- marketing \$200, entertainment \$500, equipment hire \$1000	
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

#### Budget Totals

**Total Expenditure Amount**

\$

This number/amount is calculated.

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### Further supporting documentation

**Please upload any further documentation to support your application.**

Attach a file:

Attach a file:

Attach a file:

Attach a file:

### Feedback and Declaration

\* indicates a required field

**Please tell us how you heard about our program? \***

- Word of mouth - through friends, family or colleagues
- Social Media - Facebook
- Council Website
- Direct Email from Council
- Newspaper
- Radio
- Other:

**How would you rate your experience completing this application form? \***

- 1       2       3       4       5

1 Very Dissatisfied - 5 Very Satisfied

**Please provide any feedback on the application process**

### Declaration

- I certify that to the best of my knowledge the statements made in this application are true.
- I certify that I am authorised by my group/organisation to complete this application.

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- I understand that if Port Stephens Council approves this application, I will be required to accept the conditions of the funding agreement.
- I consent to the information contained within this application being disclosed to or by Port Stephens Council for the purpose of assessing, administering and monitoring my current and any future grant applications.
- I understand that if Port Stephens Council approves a grant, I will be bound by the contents of my application to carry out my project as I have described and my application will form part of my contractual agreement with Port Stephens Council.

**I agree to the above \***

- Yes
- No

**Authorised person's name \***

**Authorised Position \***

**Reason of disagreement to declaration**