



## **GRANTS/SPONSORSHIP FUNDING SCHEME**

### **Application Form for 2010/2011**

**Need help?**

**If you have any queries with regards to this form, please**

◆ **Read the Grants/Sponsorship Funding Scheme Guidelines: or**

◆ **Contact**

**Melissa Martin**

**Tararua District Council**

**Telephone: 06 374 4080**

**Email: [melissam@tararuadc.govt.nz](mailto:melissam@tararuadc.govt.nz)**

# ORGANISATION DETAILS

**Organisation Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**Postal Address:** \_\_\_\_\_

Please give the names of two people we can contact if we need more information. The first person must be the person who filled out the form. Under the Privacy Act (1993), consent from these people must be given before their details are recorded here:

**1. Name** \_\_\_\_\_ Email: \_\_\_\_\_

Title/function \_\_\_\_\_ Phone(Day) \_\_\_\_\_

**2. Name** \_\_\_\_\_ Email: \_\_\_\_\_

Title/function \_\_\_\_\_ Phone(Day) \_\_\_\_\_

**What type of funding are you applying for? (√ one)**

Grant  Event Sponsorship

**Status of Organisation: (Please attach evidence – organisation must be recognised)**

Incorporated Society / Trust / Association (Please attach proof of legal status)

Company Limited by Guarantee Date of formation \_\_\_\_\_

Other – Give details \_\_\_\_\_

Community Group with 'umbrella organisation'

Name of umbrella organisation: \_\_\_\_\_

Have you sought consent from this organisation?  Yes  No

Numbers of members in your organisation / umbrella organisation? \_\_\_\_\_

Board / Committee members are:  Elected  Appointed

**Are you registered for GST?**  Yes  No

If yes, write your GST number below

-    -

**Please note:**

*If you are GST registered, please provide budget figures that exclude the GST component . Successful applicants who are GST registered must submit a separate GST invoice to Tararua District Council.*

*If you are not GST registered, please provide budget figures that are GST inclusive.*

# EVENT DETAILS

**Event Title:** \_\_\_\_\_

**Event Description** *(continue on separate sheet if necessary):*

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When will the event occur? *(Include time of day, duration, month and year)*

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**Event type** *(Please tick box)*

- |   |   |
|---|---|
| <input type="checkbox"/> Sports               | <input type="checkbox"/> Cultural & Historical                |
| <input type="checkbox"/> Environmental        | <input type="checkbox"/> Music/Dance/Drama                    |
| <input type="checkbox"/> Recreation & Leisure | <input type="checkbox"/> Arts & Crafts/Visual/Performing Arts |

**How often will this event occur?**

- |   |  |
|---|--|
| <input type="checkbox"/> Annually                     | <input type="checkbox"/> One off                 |
| <input type="checkbox"/> Bi-annually (twice per year) | <input type="checkbox"/> Other (please describe) |

**Has the event a confirmed sponsor(s)?**  Yes  No **Sponsors Name:** \_\_\_\_\_

**Estimated Attendance** \_\_\_\_\_

**Event Admission Price (if applicable) Adult \$** \_\_\_\_\_ **Child \$** \_\_\_\_\_

Other *(please describe)* \_\_\_\_\_

**Why does your event require funding and how will it benefit your group and the community?**

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**Have you researched to see what other events are taking place in Tararua at as the same time as yours?**

- Yes  No

*If yes, what other events are on?*

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**Do you see a synergy with the event(s) above with your event?**

- Yes  No

*If yes, please state*

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**Has your event occurred in Taranaki before?**

Yes                       No

*If yes, then how has the event been organised/supported before*

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**Is your event supported by local and/or national associations/organisations**

Yes                       No

*If yes, who and how are they supporting you?*

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**FINANCIAL DETAILS**

**Expenditure**

Please note:    You must detail your event costs  
                              Quotes are to be provided

*(Please attach a detailed budget – exclusive of GST if your organisation is GST registered; or inclusive of GST if your organisation is not GST registered.)*

Venue Hire	\$
Equipment Hire	\$
Purchase of Equipment	\$
Advertising/Promotion/Printing	\$
Materials	\$
Other Costs (specify	\$
	\$
	\$
	\$
<b>BOX 1 TOTAL COST</b>	<b>\$</b>

**Income**

Please outline how you intend to fund the project **other than through this application**

Donated Material	\$
Cash in hand towards the event	\$
Loans/Mortgages/Debentures	\$
Charge to participant or membership subscription	\$
Other sponsorship or grant (please specify source in below)	\$
Intended fundraising (provide estimate) eg raffles etc	\$
Expenditure on event to date	\$
Door Charges	\$
	\$
	\$
	\$
<b>BOX 2 TOTAL FUNDS AVAILABLE/EXPECTED</b>	<b>\$</b>

If you have applied to any other organisations for the funding for this event, please list the organisation(s), the amount of money you are applying for and when you will know the result of the application

Organisation	Amount Requested	Result Date

**TOTALS**

How much will the event cost	\$		1
		Less	
Total funds available	\$		2
		Equals	
Amount Requested (To the nearest dollar)	\$		3

## REGULATORY IMPACT

**Where is the event being held?** *(If the event is utilising more than one venue/ground, please list all below)*

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**Will your event require road closure(s)?**                      Yes                       No

*If yes, which road(s)?* \_\_\_\_\_

*At what time(s)?* \_\_\_\_\_

**Have you contacted Council with your requirements?**

Yes                       No

**Do you need to do a traffic management plan?**

Yes                       No

NB: Please be aware that if you require a road to be closed, you will need to make a formal application through Tararua District Council's District Roading Manager

## MARKETING AND PROMOTION

**Please tick if you are proposing to use any of the following forms of media:**

- |  |  |
|--|--|
| <input type="checkbox"/> National/Local TV                 | <input type="checkbox"/> Local Radio             |
| <input type="checkbox"/> Print Media (flyers, posters etc) | <input type="checkbox"/> National Radio          |
| <input type="checkbox"/> Website                           | <input type="checkbox"/> Other (please describe) |

\_\_\_\_\_

## TARARUA DISTRICT COUNCIL RECOGNITION

**If your organisation receives funding, how will your event acknowledge the support of the Tararua District Council?**

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## DECLARATION

**PLEASE PROVIDE TWO SIGNATURES**

We hereby declare that the information supplied here on behalf of our organisation is correct (one name and signature must be the first person on the front page of this form)

<b>Name</b>		<b>Name</b>	
Position in Organisation		Position in organisation	
Signature		Signature	
Date		Date	

# SUPPORT MATERIAL

The applicant may furnish Council with relevant support material, which will enhance the application. Please be selective about what you send, by only including material that will provide additional insights to your idea, which cannot be captured through the questions asked in the application form.

Clearly label any items you would like returned with your name and address. Tararua District Council will make every effort to ensure supporting material is returned. However, Council does not accept responsibility for any loss or damage which may be incurred.

**There are two compulsory items, which must be supplied with this application:**

1. A detailed and realistic budget attached with two quotes attached for items of equipment over \$500;
2. A detailed and well thought out marketing plan, attached with any additional items.

## **ADDITIONAL INFORMATION**

- ◆ All questions must be answered. An incomplete application will not be considered;
- ◆ Make sure your budget balances;
- ◆ Make sure your application is received by the due date.  
**Late applications will not be accepted**
- ◆ Applications should be posted or hand delivered to:

Melissa Martin  
District Marketer  
Tararua District Council  
P O Box 115  
26 Gordon St  
Dannevirke