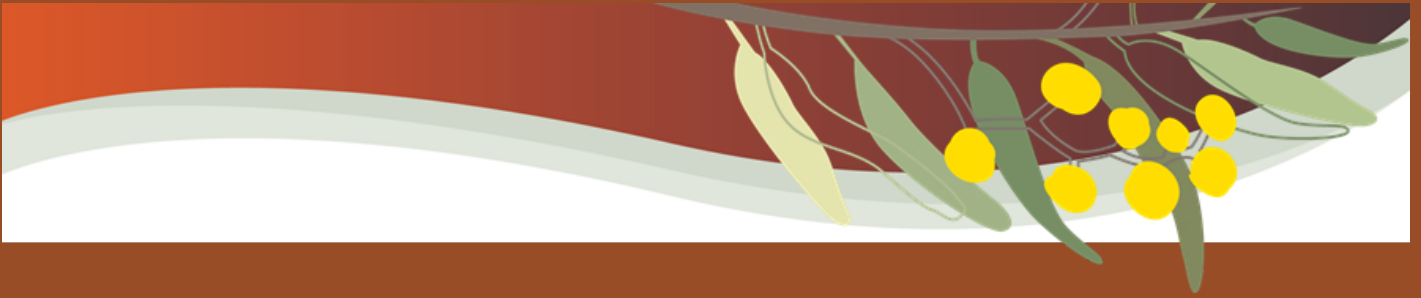


SHIRE OF WOODANILLING - COMMUNITY EVENTS FUND APPLICATION FORM



Contact Information

**Name of Organising Body/
Group**

Address

City

Post Code

Contact Person

Title
(President/Secretary/etc)

Phone Number

E-Mail Address

Organization Information

**Is the organising body
Incorporated?**

Yes
No

Year Established

**Is the organising body registered
for GST?**

Yes
No

ABN:

Proposal Request

Name of Event/Project

Total Event Budget (incl GST)

Requested Amount (Incl GST)

**How will the event benefit the
Woodanilling Community?**

**Please list the items on which
the requested amount will be
spent.**

(supply quotes if necessary)

Risk Management

(Include details of public liability
insurance cover the organising
body has, plus any risk
management actions for the event)

Type of Request

Date of Event

Is this an annual event?

Yes

No

**Are you requesting funding
on an annual basis?**

Yes

No

**How will you promote the
event?**

Community Strategic Plan

(indicate how your request fits
within the Shire of Woodanilling's
Community Strategic Plan)
