

GLENORCHY CITY COUNCIL CULTURAL CELEBRATION GRANTS - APPLICATION FORM 2023/2024

Applicant information

Glenorchy City Council would like to assist you to celebrate the unique cultural diversity within our Glenorchy municipality. This grant program seeks to empower organisations to design and deliver events to celebrate cultural diversity and strengthen community connection in the City of Glenorchy municipality.

Our Cultural Celebration Grant Program is provided to support community groups and not-for-profit organisations to present free, inclusive cultural events and activities.

Glenorchy City Council Cultural Celebration Grant activities are expected to connect the broader community with Glenorchy's unique cultural diversity ... and to have some fun, too!

Glenorchy City Council Cultural Celebration Grants activities must be delivered within the Glenorchy local government area and be completed by 31st May 2024.

Grant recipients are responsible for all aspects of the activity. All activities are to be delivered in a way that is safe and compliant with WHS criteria. Before completing this application form, you should have read the Glenorchy City Council Cultural Celebration Grants guidelines.

Incomplete applications and/or applications received after the closing date will not be considered. This section of the application form is designed to help you, and us, understand if you are eligible for this grant. It is important that you complete these questions before any others to ensure you do not apply for an unsuitable grant.

Please return your completed application form to Council's Customer Services area, post to PO BOX 103, Glenorchy 7010 or email gccmail@gcc.tas.gov.au. Applications close 31 March 2024, and funded projects must be completed by 31 May 2024.

Please outline your group/organisation details:

Applicant Name:

Street Address:

Postal Address:

What is your group/organisation's purpose?

ABN details

Does your group/organisation have an ABN?

Yes

No

Information from the Australian Business Register

ABN	Entity Name
ABN Status	Entity Type
GST	DGR Endorsed
ATO Charity Type	ACNC Registration
Tax Concessions	Main Business Location

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Public Liability Insurance details (please attach)

Contact Person

Title: _____ First name: _____ Last name: _____

Position: _____

Phone number: _____ Email: _____

Activity details

Activity name: _____

Amount of funding requested inclusive of breakdown: _____

Activity start date and time	Date (DD/MM/YYYY)	Time (AM/PM)
Activity finish date and time	Date (DD/MM/YYYY)	Time (AM/PM)



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Activity location

Location(s) of the activity(ies)	Capacity of venue	Is location / venue operated by Glenorchy City Council?	
		Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No

Expected number of participants:

Agreement

Workplace health and safety

I agree to meet all relevant compliance / health and safety legislative requirements and deliver any activities in a way that is safe and compliant with any relevant legislation.

Yes **No**

Permissions

If the activity is held on Council land, I agree to obtain all appropriate land use and place of assembly permissions.

Yes **No**

Acknowledgement

I agree to acknowledge the Glenorchy City Council as the funder of the activity in all written and spoken promotional material in relation to the activity and use the approved Glenorchy City Council logo in all written promotional material. I agree to have any promotional material referencing Glenorchy City Council approved by Council prior to publication.

Yes **No**

Acquittal

I agree to fully acquit the grant provided inclusive of completing a report sent to me by Council by 30 June 2024, providing copies of receipts associated with the event and to return any unexpended funds.

Yes **No**

Media and Promotion

I agree to media and other promotion of the event where applicable. I agree to provide a minimum of three (3) images to Council (with signed photo permissions from any people included in the photos) as part of the acquittal process.

Assessment:

I understand that depending on the amount of funding, that activities may be subject to agreed milestones and assessment.

Yes **No**

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Cancellation

I agree to notify Council if the planned activity does not go ahead and return the full amount of the grant.

Yes **No**

COVID-19

I agree to deliver the activity in a manner that is in compliance with direction given by the Australian and Tasmanian Governments.

Yes **No**

Name of Authorised Person:

Signature:

Date: / /
