

Sporting Excellence Application Form

Form Preview

Guidelines

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- If Council approves the contribution application, the applicant must adhere to the following requirements:
 - Obtain all necessary consents and approvals.
 - If under any circumstances the competitor does not attend the event, they must return all funds to the Council within two weeks after the completion of the event.
 - An obligation to notify Council of any material changes in the event. E.g. event dates changed.
 - Appear in Flinders Shire promotional material and media releases in the form of written press, photographs and digital media and give public acknowledgement to the Council's contribution.
- Council must receive a completed application form from the competitor towards the costs of their sporting activity four weeks prior to the actual event or as soon as practical after selection;
- The application must detail their sporting achievements over the last twelve months and include confirmation from the peak body of their selection;
- The applicant must be a current resident of Flinders Shire, or a child a dependant of a Shire resident, e.g. student at boarding school;
- The trip must be organised by a regional, state, national or internationally accredited peak body/organisation;
- The applicant must have been selected through a point systems, placings or selection through a formal sporting body in their chosen sport.
- Council will not consider school trips/excursions under this policy;
- Successful applicants must be willing to appear in Flinders Shire promotional material and media releases in the form of written press, photographs and digital media.
- Flinders Shire Council requests the competitor to give public acknowledgement of Council's contribution.

Funding Tiers

- Representing North Queensland within Queensland - \$500
- Representing Queensland within Queensland - \$500
- Representing Queensland interstate - \$1000
- Representing Australia within Australia - \$1500
- Representing Australia overseas - \$2000

Applicant Details

Competitor Name

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

Date of Birth

Must be a date.

Resident of the Flinders Shire

- ☐ Yes
☐ No

Address

Address

Phone Number

Must be an Australian phone number.

Email

Must be an email address.

Preferred Contact Method

- ☐ Phone
☐ Mail
☐ Email

Parent/Guardian Details (if applicant is under 18)

Name

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

Relationship to Applicant

Resident of the Flinders Shire

- ☐ Yes
☐ No

Address

Address

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Parent / Guardian Details (if applicant ins under 18)

Phone Number

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Must be an Australian phone number.

Email

--

Must be an email address.

Preferred Contact Method

Event Details

Event Name

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Event Date

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Must be a date.

Location of Event

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Competing Level

- ☐ Representing North Queensland within Queensland
- ☐ Representing Queensland within Queensland
- ☐ Representing Queensland Interstate
- ☐ Representing Australia within Australia
- ☐ Representing Australia Overseas

Sponsorship Details

Amount Requesting

\$

Must be a dollar amount.

From \$500 - \$2000

Brief description of what the sponsorship will be used for.

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Brief description of sporting achievements over the past 12 months.

Payment Preference

- ☐ Cheque
☐ Direct Debit

Please complete the following for direct debit.

Account Name

BSB Number Account Number

Must be a valid Australian bank account format.

Please attach copy of confirmation from the peak body of your selection

Attach a file:

Please attach proof of residency e.g drivers license, invoice, etc.

Attach a file:

Declaration

I certify that I am authorised submit this application for Flinders Shire Council's Contribution For Sporting Excellence. I have read the Council Contribution For Sporting Excellence Policy relating to the sponsorship and certify that to the best of my knowledge the information provided in this form is correct.

I agree to provide Council with additional information if required to assess this application. I agree to comply with all requirements of the Council Contribution For Sporting Excellence Policy. I will acknowledge the support of Council in all relevant promotional and printed material. I agree that if I don't attend the event selected for, I will refund the funding back to the Council within two weeks after the event.

Name (Competitor or Parent / Guardian)

Title First Name Last Name