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| **THE BAROSSA COUNCIL** | **logo-coloured-graphics-23-6-99** |
| **YOUTH GRANT APPLICATION FORM** |

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| **Related Policy/Process** | **TBCPOC4450 – Community Assistance Scheme Policy** | **Form Number:**  | TBCFOR4461 |
| **Form Owner:** | Director Corporate and Community Services | **Last Revised Date:** | 07/06/2017 |
| **Document Control:** | Manager Community and Facilities Development | **TRIM Reference:** | 17/37062 |
| **Date Approved:** |  | **Next Review Date:** | June 2019 |

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| **1.** | **APPLICANT DETAILS** |

Name:       Date of Birth:

Residential Address:

Postal Address:

Contact Phone Number *(Parent/Guardian if Applicant is under 18 years of age):*

Mobile       Home

Email

Representing (name of State/National Body)

Are you representing State or National level?

Are you full time employed? Yes [ ]  No [ ]

Do you have commercial sponsorship? Yes [ ]  No [ ]

Details of the event for which sponsorship is sought:

Date/place of the event:       \_\_\_\_\_\_\_

What is the value of the out-of-pocket expenses for the applicant?

Copy of signed Declaration attached (Page 2)? **(Required)** Yes [ ]  No [ ]

*(If this application is post-event, a certificate of participation will suffice.)*

Copy of your event itinerary attached? **(Required)** Yes [ ]  No [ ]

Please tick if you do not wish to have your picture appear in media: Facebook [ ]  Newspaper [ ]

Applicant Signature:       \_\_\_\_\_\_ Date:       \_\_\_\_\_

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| If Applicant is under 18 years of age:Parent/Guardian Name       \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**FOR OFFICE USE ONLY: Received funding in the past? 🞏 Acquittal requirements completed?** 🞏**THE BAROSSA COUNCIL** |  |
| **YOUTH GRANT DECLARATION FORM** |



This certifies that

of

(address)

is a member of

(Club/Organisation)

and has been selected to participate in:

(event for which sponsorship is sought)

in      on

 (place) (date)

Name of local/State Association completing this declaration

Name of coach/representative completing this declaration (please print)

      Telephone No

Signature       Date