

Small Town Australia Day Grants 2027

Form Preview

Australia Day Grant Program

* indicates a required field

Confirmation of eligibility

Please note that this funding is only available for Australia Day celebration events held in eligible small towns with a population size of less than 10,000 people. You must confirm your eligibility to apply to this program, prior to submitting your application.

You can do this by contacting the program coordinator, details below:

Sharlene Putman Team Leader - Major Events
Phone: 03 5832 9795
Email: sharlene.putman@shepparton.vic.gov.au

Australia Day Community Celebration Event

**Name of Small Town/
District where the
community celebration
event will be held ***

**Total Grant Amount
Requested ***

\$
Must be a dollar amount between \$500 - \$3,500

Organisation Name *

Organisation Name

The applicant must be an organisation to be eligible

Contact Person Name *

Title	First Name	Last Name

Applicant Postal Address *

Address

Suburb	State	Postcode

**Applicant Primary Phone
Number ***

Applicant Primary Email *

Please try to utilise the club / c

Small Town Australia Day Grants 2027

Form Preview

Applicant Other Phone Number

How did you find out about this grant round?

- ☐ Council Website
☐ Council Staff
☐ Word of mouth
- ☐ Previously Applied
☐ Facebook/Social Media
☐ Other:

Your Organisation

Please provide us with a brief description of your organisation? *

Word count:

No more than 300 words. What does your organisation do? How long have you been established? How many members? Etc.

Does your organisation have public liability insurance to cover the event (minimum \$20 million)? *

- ☐ Yes - Please attach current policy to this application
☐ No - Please contact Council

Incorporated Organisations

Is your organisation incorporated? *

- ☐ Yes
☐ No - you will need an auspice organisation to assist your application

Incorporation number

Does your organisation have an ABN? *

- ☐ Yes
☐ No

Applicant ABN

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

ABN

Entity Name

ABN Status

Entity Type

Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

ACNC Registration

Tax Concessions

Small Town Australia Day Grants 2027

Form Preview

Main Business Location

Auspice Details

This section only apply to organisations that are NOT incorporated.

A letter will be required from your auspice organisation confirming their willingness to accept the auspice role (please attach to this application). A copy of the Auspice's public liability insurance is also required.

Auspice Organisation Name

Organisation Name

Auspice Contact Name

Title

First Name

Last Name

Auspice ABN

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

ABN

Entity Name

ABN Status

Entity Type

Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

ACNC Registration

Tax Concessions

Main Business Location

Auspice Primary Address

Address

Suburb

State

Postcode

Auspice Primary Phone Number**Auspice Primary Email****Event Size**

Small Town Australia Day Grants 2027

Form Preview

How many people do you expect will attend the Australia Day community celebration event? *

Must be a number - Please place 0 if this is your first event

If the event has been held before, how many people attended your last event?

Must be a number

About Your Event

What date will the celebration occur? *

Must be a date and between 24/1/2027 and 29/1/2027.

Can you please describe your event and what you are planning to do? *

Word count:

Must be at least 30 words.

What will your event involve and will your event celebrate our community as well as celebrating Australia Day? Will your event bring the community together? Will you be having a guest speaker? What activities do you have planned to celebrate the occasion?

How will you ensure your event celebrates the community and Australia day and our community pride? Will you involve different groups to help plan and deliver the event? *

Word count:

Must be at least 30 words.

How will the event foster community pride and inclusion? How and who will be involved in delivering this event, eg. contractors, service clubs, school groups, businesses etc.

How will you showcase your community's identity? *

Must be at least 25 words.

Eg. By engaging local talent, or by providing artistic and/or cultural activities within your event/celebration

How will you recognise your towns local Award winners? *

Word count:

Must be at least 30 words.

Eg. are the finalists provided with a certificate of recognition? Will a dignitary award the winners with their awards?

What considerations have you made to

Small Town Australia Day Grants 2027

Form Preview

ensure the event is accessible and welcoming to everyone in the community? *

Word count:

Must be at least 30 words.

Eg. Location of the event, accessible seating, car parking, inclusive language, involving different communities etc

Do you have an event plan or timeline to assist your group to deliver this event? How are you going to market or promote your event?

Word count:

Must be at least 30 words.

Do you have a committee or volunteers to assist you in delivering the event? Have you considered the potential risks? What type of promotion will you undertake to encourage increased participation?

What considerations have been made to make the event environmentally sustainable? *

Word count:

Must be at least 30 words.

Eg recycling of waste, limit the amount of waste, no use of single use plastics etc

Acknowledgement of Country

Will your event include an Acknowledgment of Country? *

- ☐ Yes
☐ No

Goods and Services Tax (GST)

Is your organisation registered for GST? *

- ☐ Yes
☐ No

Budget

The **maximum** grant amount that can be requested from Council for this program is **\$3,500** per event.

- List all the costs of delivering the Festive Event under **expenditure**.
- List all sources of **income** that will be used to deliver the Festive Event under **income**.
- Don't forget to include the **grant amount** you are asking for from Council.

Income and Expenditure must be an equal amount.

You must provide valid quotations as attachments to your application if any one item is \$1,000 or over within expenditure budget.

All \$ amounts should be listed GST **exclusive**.

Income	\$	Expenditure	\$

Small Town Australia Day Grants 2027

Form Preview

Council Grant Request	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

Budget Totals

Total Income Amount

\$

This number/amount is calculated.

Total Expenditure Amount

\$

This number/amount is calculated.

Income - Expenditure

\$

This number/amount is calculated.

In kind (if applicable)

An in-kind contribution something that would normally be paid for but is given to the event at no cost.

Please include details of any contributions to the event that are being received in-kind.

If you have volunteers working on the event you can include their contribution valued at:

- \$25 per hour for unskilled labor
- \$40 per hour qualified trades person
- \$65 per hour machinery hire including driver

In-Kind Item

\$ In-Kind Amount / Value

	Must be a dollar amount.

Total In-Kind Amount

Total In-Kind Amount

This number/amount is calculated.

Permits and Approvals

Small Town Australia Day Grants 2027

Form Preview

In some cases, approvals/permits maybe required to carry out proposed events / acknowledgement ceremony.

Applicants should discuss their event/celebration with the responsible body e.g. Council or a Victorian Government Department, prior to submitting their application. Your offer of funding will be made conditional to you obtaining regulatory approvals. The approval/ permit must be obtained prior to the event proceeding. If your event does not receive the appropriate permits (if applicable) and the event proceeds without approval, the funds awarded will need to be returned to Council.

Council officers are happy to assist applicants with the process of gaining approvals (eg. Event permits).

Does your event require any form of permit and/ or approval from Council or any other authority?
*

- ☐ Yes
☐ No

If Yes, what approval/s?

Eg. Event permit, traffic management approvals etc

Attachments

Please upload your current Public Liability Insurance certificate *

Attach a file:

Quotes for any items \$1,000 or higher

Attach a file:

Auspice letter (if required)

Attach a file:

Other documents as relevant

Attach a file:

Declaration and Privacy

Privacy Statement

Greater Shepparton City Council manages your personal information in accordance with its Privacy Policy and the Privacy and Data Protection Act 2014 (Vic). Your personal information is collected to communicate with you regarding your grant application. It is disclosed to council officers for review of your application and may be disclosed to other areas of Council to administer your grant application. If you do not provide the requested information we may be unable to process your application and keep you informed of the outcome of the application. Council may also use your personal information to contact you regarding future grant rounds. To opt out of future notification, gain access to or update your personal information please contact Council's Grants Coordinator on (03) 5832 5218.

Declaration

Small Town Australia Day Grants 2027

Form Preview

I certify that all details supplied in this application and in any attached documents are true and correct to the best of my knowledge, and that the appliacion has been submitted with the full knowledge and agreement of the management of my organisation.

I have read the accompanying guidelines for applicants provided with this application form.

I agree that I will contact the Greater Shepparton City Council immediately if any information provided in this application changes or is incorrect.

I understand that the information above will be used in accordance with relevant legislation and declare that this information is correct to the best of my knowledge. I also agree to provide final acquittal reports as required.

Authorised Person Name *

Title

First Name

Last Name

Position *

Date *