



# Community Sponsorship & Donation

## APPLICATION FORM

### CRITERIA:

Eligible projects are those that provide benefit to the local community and are aimed at improving the future prospects of the applicant – that being an individual or organisation.

Ineligible applications:

- \* Rent, administrative costs, fuel, food, airfares, wages
- \* Applicants who are not within the club catchment area, being the municipality of Darwin
- \* Funding will not be provided to political parties, political candidates or political campaigns

**If your application is successful you will be required to:**

- Make an appropriate level of acknowledgement of the Casuarina All Sports Club's contribution to the project
- Complete an acquittal form
- Complete a report / progress report at the end of the project

Date of application: \_\_\_\_\_

Name of Organisation / individual applying: \_\_\_\_\_

Primary Contact Person:

Title: \_\_\_\_\_ Name: \_\_\_\_\_  
e.g. Mr/Mrs/Ms

Postal Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Post code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E Mail: \_\_\_\_\_

Secondary Contact Person:

Title: \_\_\_\_\_ Name: \_\_\_\_\_  
e.g. Mr/Mrs/Ms

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

1. Please provide a short outline of your request:

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FINANCIAL INFORMATION

2. What is the total amount of funding you are seeking with this application?

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3. Will your project still be viable if you receive funding less than the requested amount?

◆ Yes

◆ No

4. Please outline your project budget:

Budget Item		Other funding sources
<b>Total funds</b>		

**\*\*Please note that for ALL funding requests greater than \$1,000 we require a copy of your last annual report including financial statements and auditor’s report.**

5. Have you attached the report?

◆ Yes

◆ No

6. How will the Casuarina All Sports Club be recognised for assisting your project:

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7. Briefly summarise what your organisation is?

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8. How many members are there in your organisation?

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9. What local need does your project address?

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10. Who will be the main beneficiary of the project?  
(e.g. junior sport, children with learning difficulties).

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11. How will you manage and deliver this project?

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12. How will you monitor and evaluate this project?

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13. What is the proposed commencement date and completion date for the project?

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14. Is this project already assisted by an existing local, Territory, or Commonwealth Government funding? If so, please give details (how much, which program):

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15. Has your application been supported by any other community organisations or do you intend to work in partnership with any other organisation on this project?

◆ Yes

◆ No

If yes, please identify:

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16. Has your organisation received funding from the Casuarina All Sports Club previously?  
◆ Yes     ◆ No  
If yes, in what year, for what purpose and how much?

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**Please Note: Organisations/ individuals who have not submitted a report / progress report should not be considered for further funding.**

I, the undersigned have been authorised by the Organisation/Individual to make the funding request on behalf of:

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Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Completed applications to be addressed to the Community Marketing Manager, Casuarina All Sports Club  
PO Box 41834, Casuarina. NT 0811. T: 89206924 F: 89451939 E:marketing@casclub.com.au

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**Casuarina All Sports Club use only**

Application received: \_\_\_\_/\_\_\_\_/\_\_\_\_ Received By : \_\_\_\_\_

Application acknowledged by/on: \_\_\_\_\_ Application Reviewed by/on: \_\_\_\_\_

Recommended:

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Approved/ declined: Club Manager

Approved/declined General Manager

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