

Applicant Details



Applications and supporting documentation must be submitted no earlier than three (3) months and no later than three (3) weeks prior to the event to the City of Belmont, Locked Bag 379, Cloverdale WA 6105, or emailed to belmont@belmont.wa.gov.au.

For further information, please contact the Cirt of Belmont on 9477 7454.

Applicants name:			Date of Birth:
Address:			·
Suburb:			Post Code:
Contact Numbers:			
Email:			
Parent / Guardian if under 18:			
Name of club / organisation			
Name of State or National Body:			
Event Details			
Description of second /			
Description of event / purpose of donation			
Will you be representing	Western Australia (Interstate) Up to \$500	OR	Australia (International) Up to \$900
Location (Town or City) of Event:			
Dates / duration of event:			

Further Information

Have you applied for assistance from the City before?	YES / NO
Was your application for assistance from the City approved?	YES / NO
Are you willing to have your photograph included in the Belmont Bulletin or other media for promotional purposes?	YES / NO
Have you attached your proof of residency?	YES / NO
Have you attached your 'letter of selection'? (refer to Terms and Condition 2j)	YES / NO

NOTE: Only one application per financial year is accepted. No requests for gap donations will be accepted. Refer to Terms and Condition number 2d.

Payment Details

All donations are paid by Electronic Fund Transfer (EFT) please provide:

Account Name:		
BSB	Account Number:	
Bank Name:		
Email address (for remittance advice)		

Cost to Participate

Expenses	Amount	Income	Amount
Airfare	\$	Organising Body (Your club)	\$
Accommodation	\$	Sponsorship Funds	\$
Registration	\$	Fundraising Activities	\$
Uniforms	\$	Fundraising (e.g. GoFundme)	\$
Miscellaneous Expenses	\$	Other Funds	\$
•		•	
•		•	
•		•	
TOTAL EXPENSES	\$	TOTAL INCOME	\$
Please provide the website li GoFundMe / fundraising web			

Declaration

I confirm	the above	information	is true a	and correct	and on	my return	wills	submit	the	'Sporting	and	Cultural
Donation	Acquittal F	orm' as evid	ence of	attendance	at the a	bove ment	tione	d event	i.			

Applicants signature:	Date:	
Guardians signature (if applicant is under 18)	Date:	