COMMUNITY SPONSORSHIPS AND DONATIONS Application Form



Applicant organisation's details

Registered name of organisation Enter name of the organisation with legal authority to make an application						
Street Address						
Is the organisation not	-for-profit?	What is the ABN?	Year established?			
□ Yes □ No						
NOTE: An ABN is required for Inland Rail to enable payment to an entity						
GST registered	DGR status	Website				
□ Yes	☐ Yes					
□ No	□ No					
Purpose of the organis	ation					
Describe your organisation's		ents in 500 words or less				
, ,	, 0					
Are you part of a Tradit	tional Owner group?					
☐ No ☐ Yes If yes, what is the n	ama of valir grain?					
□ res ii yes, what is the h	ame or your group?					
Bank details						
BSB						
Account Number						
Account Name						





Contact person's details

Name Name of a person with authority to make this application on behalf of the organisation			
Position held in organisation	Phone number	Email address	
Project details			
Name and detail the project, event	or activity		
How does it contribute to your con	mmunity's well-being,	prosperity and/or sustainability?	
Which priority area/s does it related Culture Safety Environment Recreation Entrepreneurism	• to?		
How does it align with Inland Rail' Future thinking Active engagement No harm Results	s values?		
Are Australian Rural Leaders Four ☐ Yes ☐ No / Unsure	ndation alumni involv	ed?	
How will Inland Rail be recognized	for its support? E.g., in	n newsletters, website, signage, publicity	



Budget

How much funding from Inland Rail is requested?		What is the total value of the project, event, or activity?	
Inc. GST (must be between \$1000 and \$4000)		Includes other funding and in-kind support	
How will th	nis funding be used? Detail on quotes provide	d should match amount being requested	
Attachment checklist – MANDATORY ATTACHMENTS Have you attached the following?		Declaration and signatures	
		I hereby declare that all information I have provided on this application form is true and correct to the best of my knowledge.	
☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No	Certificate of Incorporation ASIC Certificate (proof of ABN) Outline of governance structure and committee members	Authorised organisation representative's details and signature:	
□ Yes □ No Evidence of insurance (\$20,000,000 public liability insurance) – current certificate □ Yes □ No Quotes for proposed spend of sponsorship		SIGNATURE Name	

Position

Date

request (quote includes provider's ABN and GST)

 \square Yes \square No Other that may support your application