

2024 COOLAMON SHIRE EVENT FUNDING PROGRAM

APPLICATION FORM

Applicant Details			
Contact Name			
Event Name			
Postal Address			
Mobile / Business Phone			
Email			
Organisation Details			
Incorporated Body (or the name of the sp	oonsoring incorp	orated body the event is run under)	
ABN (if applicable)			
Are you Registered for GST		Yes / No	
Do you have Public Liability to cover this event?		Yes / No	
Please provide a short description and history	3,,	tion metaling examples of similar projects you have managed.	
Please provide a short description and history		tion melalang examples of similar projects you have managed.	
Event Details		tion melalang examples of similar projects you have managed.	
		tion melalang examples of similar projects you have managed.	
Event Details		tion melalang examples of similar projects you have managed.	
Event Details Event Date (s)		tion melalang examples of similar projects you have managed.	
Event Details Event Date (s) Event Time	2?		
Event Details Event Date (s) Event Time Which town will the event take place Event Description	2?		
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Min:

2022:

Anticipated Attendance

Total Attendance Previously

Max:

2023:

Do visitors typically stay overnight when attending this event? If yes, please specify how many nights they would typically stay in Coolamon Shire.		
Goals and Objectives		
	growth and development. You may like to refer to the event offer, venue, committee, grants and funding, finance, kers, attendance	
Coolamon Shire Community Strategic Plan		
Please outline how your event aligns with the Coolar	mon Shire Community Plan.	
Collaboration		
·	events, businesses and/or tourism operators. If possible, ved in the project and briefly state the nature of their	
Marketing		
Please describe your target market e.g. families with young children, visiting friends and relatives, c	ar enthusiasts, Coolamon Shire residents, youth of Coolamon	
How do you plan to promote your event? Please tick	c if appropriate.	
☐ Council Website (www.visitcoolamonshire.com.au) ☐ Poster ☐ Flyer/Postcard/Other ☐ Television ☐ Radio ☐ Print Advertising eg: Newspaper, magazines	☐ Council Website (coolamonshire.com.au) ☐ Direct Mail ☐ E-Newsletters ☐ Community Newsletters ☐ Social Media eg: Facebook, Instagram ☐ PR (Local, Regional, National) ☐ Event Ambassador	
☐ Word of Mouth	Other	

Budget

	ated income and expenses. Within the budget, please breakdown your			
marketing expenditure. Other items to consider could include:				
	ester other) Daid advertising (a.g. Talevisian radio print Facebook			
- Collateral design and print (e.g. flyer, poster, other), Paid advertising (e.g. Television, radio, print, Facebook, digital), Graphic design for digital marketing, Photography, Signage and/or Merchandise				
(Attach budget which highlights marketing spend)				
unding				
Maximum amount of grant requested by a	pplicant? (Maximum \$3,000 per event)			
\$				
Have you or your organisation applied for a If yes, please outline.	ny other grants or funding opportunities for the 2024 event? Yes/No			
Mandatory Supporting Material				
Mandatory attachments:				
	ecent annual report and/or financial statements			
	rate of Currency for Public Liability Insurance			
	orated, a letter from a sponsoring incorporated body			
•	Registration Form (For inclusion in the It's On Brochure)			
☐ A completed Event Budget, highligh	iting the marketing expenditure			
☐ A completed Risk Assessment	envide decrimentation and/or hyginess plan highlighting future event			
First year event application must pr sustainability	ovide documentation and/or business plan highlighting future event			
Any Additional Comments				
Signature of Applicant				
Applicant (Name)				
On Behalf of Organisation				
which my event directly aligns.	cation, I have read the Coolamon Shire Community Strategic Plan of ove event hereby consent to the making of this application.			
Date				
Signature				