

# 2023-2024 Corporate Sponsorship Form Preview

## Eligibility

\* indicates a required field

## Applicant Information

Before completing this application form you should have read the City's Corporate Sponsorship Program Guidelines. ([Corporate Sponsorship Program - City of Joondalup](#))

Applications that don't meet these guidelines or that are incomplete will not be considered.

This section of the application form is designed to help you, and us, understand if you are eligible for this program.

If you have any questions please contact **Lia Harris, Strategic Marketing and Sponsorship Officer t: 9400 4169 e: [lia.harris@joondalup.wa.gov.au](mailto:lia.harris@joondalup.wa.gov.au)**

If you do contact us throughout the application process, please quote the application number below:

### Application Number

This field is read only.

## Confirmation of Eligibility

### I confirm that:

- I have read and understood the City's Corporate Sponsorship Program Guidelines.
- I am able to demonstrate alignment between the event, program or activity and the criteria and objectives of this program.
- The event, program or activity is being hosted within the City of Joondalup boundaries.
- The event, program or activity will not occur within 3 months of the application being received.
- The organisation, event, program or activity has not previously submitted and been successful with an application for sponsorship within the same financial year.
- The organisation, event, program or activity has not received any financial support through another City funding program within the same financial year.
- The application is not for capital or general operating expenditure, or for more than 50% of the total cost of the event, program or activity.
- The application is not for an individual person or family benefit.
- The organisation, event, program or activity is not involved with illegal activities, tobacco, adult related industries, racist organisations, political organisations, religious activities for the purpose of furthering religious doctrine, companies or project seeking City approvals or endorsements, harm toward the environment or is in conflict with the City's values.

**Please select below: \***

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Yes

No

You must confirm that all statements above are true and correct.

## Applicant Details

\* indicates a required field

### Privacy Notice

We pledge to respect and uphold your rights to privacy protection under the [Australian Privacy Principles](#) (APPs) as established under the *Privacy Act 1988* and amended by the *Privacy Amendment (Enhancing Privacy Protection) Act 2012*.

City's [privacy statement](#).

## Applicant Details

### Organisation \*

Organisation Name

For organisations: please use the organisation's full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

### 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.

| Information from the Australian Business Register |                                  |
|---|----------------------------------|
| ABN   |                                  |
| Entity name                                       |                                  |
| ABN status  |                                  |
| Entity type                                       |                                  |
| Goods & Services Tax (GST)                        |                                  |
| DGR Endorsed                                      |                                  |
| ATO Charity Type                                  | <a href="#">More information</a> |
| ACNC Registration                                 |                                  |
| Tax Concessions                                   |                                  |
| Main business location                            |                                  |

Must be an ABN.

### Applicant primary address

Address

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## Applicant postal address

Address

  

## Applicant website

Must be a URL.

## Primary Contact Details

### Primary contact \*

Title      First Name      Last Name

            

This is the person we will correspond with about this sponsorship application.

### Position held in organisation \*

e.g., Manager, Board Member or Fundraising Coordinator.

### Primary contact primary phone number \*

Must be an Australian phone number.

### Primary contact email address \*

This is the address we will use to correspond with you about the sponsorship application.

## Event, Program or Activity Details

\* indicates a required field

### Event, program or activity name \*

### Start date \*

Must be a date.

### End date \*

Must be a date.

### Start Time

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## End Time

## Address (the event, program or activity must be located within the City of Joondalup boundaries) \*

Address

  

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

## Event, program or activity overview \*

Detailed description of the event, program or activity including (but not limited to) programming information and historical information.

## What are the expected outcomes of the event, program or activity? \*

Outline KPI's for the event (i.e. attendance targets, participation rate), what you want the event, program or activity to achieve.

## Criteria

\* indicates a required field

## Outline target market/groups for the event, program or activity. \*

Does this event, program or activity reach the City's key target market groups of residents, ratepayers, youth, seniors and/or businesses within the region?

## Anticipated attendance, participant and/or spectator numbers. \*

## Cost to attend the event \*

\$

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**Cost to participate in the event \***

\$

**How will the event, program or activity create long term value to the City and it's residents? \***

Detail the community benefits/value this event, program or activity can provide.

**How will the event, program or activity provide positive exposure for the City's brand and image locally and/or regionally? \***

Provide details of the planned advertising and promotional campaign; proposed media coverage and risk mitigation strategies.

**Outline the tangible benefits the City will receive as part of the sponsorship agreement. \***

e.g. logo on promotional materials, social media; signage at the event, program or activity; ability for a City representative to attend/speak at the event etc. Outline what is included as part of this agreement and what can be provided at an additional cost to the City.

**How will the event, program or activity enhance the liveability of the City for the community and promote Joondalup as a destination of choice for visitors to the region? \***

**Will the event, program or activity attract visitors from outside the region? \***

- Yes
- No

At least 1 choice must be selected.

**Provide further details about these visitors including how they will be communicated with/attracted to the event, anticipated numbers, where they will come from and/or if they will stay in the region for the event.**

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**How will the event, program or activity stimulate economic development and/or provide benefits to local businesses? \***

Will local businesses be engaged with the event, program or activity; will participants/attendees spend with local businesses?

**Upload documents/materials that will support the above. e.g. advertising schedules, event plans**

Attach a file:

## Financials

\* indicates a required field

**Total Amount Requested**

\$

\*

What is the total financial support you are requesting in this application (excluding GST)?

If successful, what expenditure item/s will the City's contribution cover?

**Expenditure**

**\$**

|  |    |
|--|----|
|  | \$ |
|  | \$ |
|  | \$ |
|  | \$ |
|  | \$ |
|  | \$ |
|  | \$ |
|  | \$ |
|  | \$ |

**Budget (excluding GST)**

Please outline your project budget in the income and expenditure tables below, **including details of other funding that you are seeking and/or have applied for, whether it has been confirmed or not.** All amounts should exclude GST.

Provide clear descriptions for each budget item in the 'Income' and 'Expenditure' columns,

Use the 'Notes' column for any additional information you think we should be aware of.

Please **do not add commas** to figures – e.g. type \$1000 not \$1,000 – this will ensure your figures for each table total correctly.

| Income Description | Income Type | Confirmed Funding? | Income Amount Notes (\$) |
|--------------------|-------------|--------------------|--------------------------|
|--------------------|-------------|--------------------|--------------------------|

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|  |  |  |                          |  |
|--|--|--|--------------------------|--|
|  |  |  | \$                       |  |
|  |  |  | \$                       |  |
|  |  |  | \$                       |  |
|  |  |  | \$                       |  |
|  |  |  | Must be a dollar amount. |  |

| Expenditure Description | Expenditure Type | Expenditure Amount (\$) | Notes |
|-------------------------|------------------|-------------------------|-------|
|                         |                  | \$                      |       |
|                         |                  | \$                      |       |
|                         |                  | \$                      |       |
|                         |                  | \$                      |       |

## 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.

## Applicant Capacity and Experience

\* indicates a required field

**Please provide details about your organisation and/or team, and previous experience that will give us confidence that you can complete the work you've described in this application. \***

Include in this section information about your strategies for providing the inputs (money, staff/ volunteers, time/expertise, equipment, facilities etc.) and how you will complete this event, program or activity within the proposed timelines. Provide information also about any past work that may demonstrate your organisation's capacity to undertake this work. Provide links to further explanatory material if available/relevant.

**Upload any documents/materials that will support the above e.g. references, previous examples of work, staff profiles**

Attach a file:

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## Certification and Feedback

\* indicates a required field

### Certification

This section must be completed by an appropriately authorised person on behalf of the applicant organisation (may be different to the contact person listed earlier in this application form).

- Submission of this application constitutes acceptance of these Terms and Conditions.
- The information provided on the application form is correct at the date of submission.
- Corporate sponsorship applications are typically assessed at the end of each month.
- Written notification of the outcome of the assessment will be issued within three months of the application being received.
- If the application is successful, following completion of any details, a sponsorship agreement will be drafted by the City outlining the terms of the sponsorship and the duties of each party, which must be signed and kept on file by both parties.
- By submitting this application, there is no guarantee that the City will sponsor the event, program or activity.
- Applications are not transferable between organisations, events, programs or activities.
- The application must outline the full details of the event, program or activity and the agreement will apply strictly for the event, program or activity listed in this application.
- Corporate Sponsorship commitments are subject to available funds within the City's budget.
- The City's assessment decision for this application is final.
- The applicant will notify the City of any changes to the details in this application as soon as they become known to the applicant.

**I agree \***

Yes

No

**Name of authorised person \***

Title

First Name

Last Name

Must be a senior staff member, board member or appropriately authorised volunteer

**Position \***

Position held in applicant organisation (e.g. CEO, Treasurer)

**Contact phone number \***

Must be an Australian phone number.

We may contact you to verify that this application is authorised by the applicant organisation

**Contact Email \***

Must be an email address.

**Date \***

Must be a date



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## Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

**Please indicate how you found the online application process:**

- Very easy     Easy     Neutral     Difficult     Very difficult

**How many minutes in total did it take you to complete this application? \***

Estimate in minutes i.e. 1 hour = 60

**Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.**