



## **AGENDA**

### **FOR SPORT, RECREATION AND GRANTS COMMITTEE MEETING TO BE HELD ON**

**12 SEPTEMBER 2016 AT 6:30 PM**

**IN COMMITTEE ROOM 1, 12 JAMES STREET, SALISBURY**

#### **MEMBERS**

Cr D Proleta (Chairman)  
Mayor G Aldridge (ex officio)  
Cr D Balaza  
Cr D Bryant (Deputy Chairman)  
Cr L Caruso  
Cr D Pilkington  
Cr B Vermeer  
Cr J Woodman  
Cr R Zahra

#### **REQUIRED STAFF**

Chief Executive Officer, Mr J Harry  
General Manager Business Excellence, Mr C Mansueto  
General Manager Community Development, Ms J Trotter  
Manager Governance, Ms T Norman

#### **APOLOGIES**

An apology has been received from Cr J Woodman.

#### **LEAVE OF ABSENCE**

#### **PRESENTATION OF MINUTES**

Presentation of the Minutes of the Sport, Recreation and Grants Committee Meeting held on 08 August 2016.

## REPORTS

### *Administration*

7.0.1	Future Reports for the Sport, Recreation and Grants Committee .....	7
-------	---	---

### *Community Grants*

7.2.1	Youth Sponsorship - August Applications .....	9
7.2.2	Minor Capital Works Grants - Status Report .....	11
7.2.3	Community Grants Program Applications for September 2016 .....	17
7.2.4	25/2016: Valley View Tennis Club Inc. - Community Grants Program Application .....	19
7.2.5	26/2016: Salisbury Amateur Athletic Club Inc. - Community Grants Program Application .....	37
7.2.6	29/2016: Ingle Farm Women's Group - Community Grants Program Application .....	57

## OTHER BUSINESS

## CLOSE



**MINUTES OF SPORT, RECREATION AND GRANTS COMMITTEE MEETING HELD  
IN COMMITTEE ROOM 1, 12 JAMES STREET, SALISBURY ON**

**8 AUGUST 2016**

**MEMBERS PRESENT**

Cr D Proleta (Chairman)  
Mayor G Aldridge (ex officio)  
Cr D Balaza  
Cr D Bryant (Deputy Chairman)  
Cr L Caruso  
Cr D Pilkington  
Cr J Woodman  
Cr R Zahra

**STAFF**

Chief Executive Officer, Mr J Harry  
General Manager Business Excellence, Mr C Mansueto  
General Manager Community Development, Ms J Trotter  
Manager Governance, Ms T Norman

The meeting commenced at 6:33pm.

The Chairman welcomed the members, staff and the gallery to the meeting.

**APOLOGIES**

An apology was received from Cr B Vermeer.

**LEAVE OF ABSENCE**

Nil

## PRESENTATION OF MINUTES

Moved Cr R Zahra  
Seconded Cr D Pilkington

The Minutes of the Sport, Recreation and Grants Committee Meeting held on 11 July 2016, be taken and read as confirmed.

**CARRIED**

## REPORTS

### *Administration*

#### **7.0.1 Future Reports for the Sport, Recreation and Grants Committee** *Cr D Balaza entered the meeting at 06:33 pm.*

Moved Cr R Zahra  
Seconded Mayor G Aldridge

1. The information be received.

**CARRIED**

### *Community Grants*

#### **7.2.1 Youth Sponsorship - July 2016 Applications**

Moved Cr D Bryant  
Seconded Cr R Zahra

1. The information be received.

**CARRIED**

#### **7.2.2 Community Grants Program Applications for August 2016**

Moved Cr R Zahra  
Seconded Mayor G Aldridge

1. The information be received and noted.

**CARRIED**

#### **7.2.3 10:2016: The Lao Association of South Australia Inc. - Community Grants Program Application**

Moved Cr D Bryant  
Seconded Mayor G Aldridge

1. The information be received and noted.

**CARRIED**



**7.2.4 13/2016: SecondBite - Community Grants Program Application**

Moved Cr R Zahra  
Seconded Mayor G Aldridge

1. The information be received and noted.

**CARRIED**

**7.2.5 14/2016: Interchange Inc. - Community Grants Program Application**

Moved Cr R Zahra  
Seconded Cr D Pilkington

1. The information be received and noted.

**CARRIED**

**7.2.6 22/2016: Salisbury East Little Athletics Centre Inc. - Community Grants Program Application**

*Cr J Woodman entered the meeting at 06:40 pm.*

Moved Cr D Bryant  
Seconded Cr R Zahra

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the August 2016 round of Community Grants as follows:
  - a. Grant No. 22/2016: Salisbury East Little Athletics Centre Inc. be awarded the amount of **\$2,500.00** to assist with the purchase of uniforms for ongoing use as outlined in the Community Grant Application.

**CARRIED**

**7.2.7 23/2016: Providence Chick [World Harvest Christian Centre Inc.] - Community Grants Program Application**

Moved Mayor G Aldridge  
Seconded Cr R Zahra

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the August 2016 round of Community Grants as follows:
  - a. Grant No. 23/2016: Providence Chick [World Harvest Christian Centre Inc.] be awarded the amount of **\$2,500.00** to assist with the purchase of catering for the 2016 Providence Conference use as outlined in the Community Grant Application.

**CARRIED**

**7.2.8 24/2016: Orana Inc. - Community Grants Program Application**

Moved Cr R Zahra  
Seconded Cr L Caruso

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the August 2016 round of Community Grants as follows:
  - a. Grant No. 24/2016: Orana Inc. be awarded the amount of **\$1,815.00** to assist with the purchase of uniforms for the Para Hills Flyers Bedford Soccer Tournament as outlined in the Community Grant Application.

**CARRIED**

**OTHER BUSINESS**

Nil

The meeting closed at 6:53 pm.

CHAIRMAN.....

DATE.....

---

<b>ITEM</b>	7.0.1
	<b>SPORT, RECREATION AND GRANTS COMMITTEE</b>
<b>DATE</b>	12 September 2016
<b>HEADING</b>	Future Reports for the Sport, Recreation and Grants Committee
<b>AUTHOR</b>	Michelle Woods, Projects Officer Governance, CEO and Governance
<b>CITY PLAN LINKS</b>	4.3 Have robust processes that support consistent service delivery and informed decision making.
<b>SUMMARY</b>	This item details reports to be presented to the Sport, Recreation and Grants Committee as a result of a previous Council resolution. If reports have been deferred to a subsequent month, this will be indicated, along with a reason for the deferral.

#### **RECOMMENDATION**

1. The information be received.

#### **ATTACHMENTS**

There are no attachments to this report.

#### **1. BACKGROUND**

- 1.1 Historically, a list of resolutions requiring a future report to Council has been presented to each committee for noting.

#### **2. CONSULTATION / COMMUNICATION**

- 2.1 Internal
  - 2.1.1 Report authors and General Managers.
- 2.2 External
  - 2.2.1 Nil.

### 3. REPORT

- 3.1 The following table outlines reports to be presented to the Sport, Recreation and Grants Committee as a result of a previous Council resolution:

Meeting Item	- Heading and Resolution	Officer
22/02/2016 7.1.1	<b>Sports Development Framework Evaluation</b> 3. Subject to consideration of a further report to Council by December 2016, the Sports Development Program be expanded, based on identification of sporting programs that will deliver greatest return to Council for any investment made. <b>Due:</b> December 2016	Adam Trottman
25/07/2016 7.2.2 further motion	<b>Funding Caps for Youth Sponsorship Applications</b> 1. The criteria for funding applied to individual youth sponsorship applications from the same organisation for the same event be reviewed. <b>Due:</b> March 2017	Mechelle Potter

### 4. CONCLUSION / PROPOSAL

- 4.1 Future reports for the Sport, Recreation and Grants Committee have been reviewed and are presented to Council for noting.

### CO-ORDINATION

Officer: EXECUTIVE GROUP GMCD  
Date: 06/09/2016 30/8/2016

---

<b>ITEM</b>	7.2.1
	<b>SPORT, RECREATION AND GRANTS COMMITTEE</b>
<b>DATE</b>	12 September 2016
<b>HEADING</b>	Youth Sponsorship - August Applications
<b>AUTHOR</b>	Mechelle Potter, Administrative Coordinator - Business Excellence, Business Excellence
<b>CITY PLAN LINKS</b>	3.3 Be a connected city where all people have opportunities to participate.

### **RECOMMENDATION**

1. The information be received.

### **ATTACHMENTS**

There are no attachments to this report.

## **1. BACKGROUND**

- 1.1 The Sports, Recreation and Grants Committee resolved that a report be provided listing all Youth Sponsorship grants approved.

## **2. CONSULTATION / COMMUNICATION**

- 2.1 Internal
  - 2.1.1 Elected Members
- 2.2 External
  - 2.2.1 Youth Sponsorship applicants

## **3. REPORT**

- 3.1 The following Youth Sponsorship Applications were assessed and approved by the Chairperson and one other member of the Sport, Recreation and Grants Committee in August 2016.
- 3.2 All applications met the criteria for the Youth Sponsorship Program and the funding allocation was provided as per the appropriate funding level, which reflect the recently approved increase of 20%.

<b>Funding per application</b>	<b>Event</b>	<b>Total Funding</b>
5 @ \$240	Five applications have been received to represent South Australia at the Australian Kodokan Judo Association National Judo Championships to be held in Wollongong, New South Wales in September 2016.	\$1,200.00
1 @ \$240	One application has been received to represent South Australia at the Australian Schools Orienteering Carnival to be held in Queensland in September 2016.	\$240.00
1 @ \$240	One application has been received to represent South Australia at the School Sport Australia 12 and Under Cross Country Competition to be held in Canberra in August 2016.	\$240.00
1 @ \$240	One application has been received to represent South Australia at the School Sport Australia Tennis Championship to be held in Albury, New South Wales in October 2016.	\$240.00
1 @ \$240	One application has been received to represent South Australia at the Primary School Sport (SAPSASA) Soccer Championship to be held in Port Kennedy, Western Australia in August 2016.	\$240.00
1 @ \$240	One application has been received to represent South Australia at the Frangipani Challenge (Calisthenics) to be held in Darwin in September 2016.	\$240.00
<b>Total Funding for August 2016:</b>		<b>\$2,400.00</b>

#### 4. CONCLUSION / PROPOSAL

- 4.1 The 2016/17 Youth Sponsorship budget allocation is \$42,000 less expenditure to date of \$16,000 (including funding for August 2016) which leaves a balance remaining of \$26,000.

#### CO-ORDINATION

Officer: EXECUTIVE GROUP  
Date: 06/09/2016

---

<b>ITEM</b>	7.2.2
	<b>SPORT, RECREATION AND GRANTS COMMITTEE</b>
<b>DATE</b>	12 September 2016
<b>HEADING</b>	Minor Capital Works Grants - Status Report
<b>AUTHOR</b>	Christy Martin, Manager Project Services, City Infrastructure
<b>CITY PLAN LINKS</b>	3.2 Have interesting places where people want to be. 3.3 Be a connected city where all people have opportunities to participate.
<b>SUMMARY</b>	This report is provided for information only as an update regarding the status of the Minor Capital Works Grants Program.

## **RECOMMENDATION**

1. This report be received.

## **ATTACHMENTS**

There are no attachments to this report.

## **1. BACKGROUND**





- 1.1 The Minor Capital Works Grants Program aims to provide funding towards minor facility improvements for clubs who provide sport, recreation and leisure activities for the Salisbury community.
- 1.2 Following a grant application process, successful grant applicants are awarded funding toward their approved works which are coordinated by City of Salisbury's Projects Division.

## **2. CONSULTATION / COMMUNICATION**

- 2.1 Internal
  - 2.1.1 Projects Division reviews applications with internal and external stakeholders.
- 2.2 External
  - 2.2.1 Sport and Recreation Grant information is available via the City of Salisbury internet site or via mail if requested.
  - 2.2.2 Grant applications received are submitted to Council periodically for consideration and endorsement.

### 3. REPORT

3.1 During 2015/16 multiple Minor Capital Works Grants reached completion. These included:

Title	Project Completion Photo	MCW Grant Allocation
RSL Salisbury Sub-Branch Inc, Relocation & Installation of Howitzer Field Gun		\$30,000
Parafield Gardens Soccer & Sports Club, Storage Shed		\$17,000
Northern Adelaide Regional Management Committee, Sand Arena Levelling & Security System.		\$30,000
Salisbury Croquet Club, Storage Shed		\$9,000




Brahma Lodge Sports Club, Painting, Flooring, Electrical and Bar Upgrade.		\$30,000
Salisbury Amateur Athletic Club Inc, Pole Vault Mat & Discuss Cage Concrete Slabs & Javelin Run-up.		\$30,000
Pooraka Tennis Club Inc, Fibreglass & Acrylic Court Resurface		\$28,500
Brahma Lodge Soccer Club, Storage Shed, Air-conditioning & Bar Modifications		\$30,000
Pooraka Football Club, Verandah Replacement		\$30,000
St Kilda Progress Association, Replacement of Outdoor Tables & Roller Shutter		\$19,000

Para Districts Obedience Dog Club Inc., External Concrete & Lining of Storage Area.		\$30,000
Para Hills Boxing Club, Air-conditioning installation and storage shelves.		\$20,000

3.2 Of the total \$392k 2015/16 budget, \$124k uncommitted program balance was returned to Council. A new allocation of \$304k has been added to the 2016/17 program.

3.3 Current grant projects expected to be completed in 2016/17 include:

Title	General Comment	MCW Grant Allocation
Football Federation of SA Sportsfield Drainage	Consultation is ongoing to confirm the scope of the project.	\$30,000
Cross Keys BMX Club New Ramp & Start Gate	Self-management paperwork near completion, project progressing on track	\$30,000
Salisbury North Football Club, Netting & Coaches Boxes	Majority of works now complete with the exception of soft fall, which will be finalised in 2016/17 	\$30,000
Salisbury Cycle Speedway, Track Lighting	In progress, quotations currently being obtained	\$25,000

Ingle Farm Junior Soccer Club, Storage Shed	In progress, quotations currently being obtained	\$25,000
Para Hills Cricket Club, Shed Base & Net Upgrade	Orders placed and construction commenced	\$17,000

#### **4. CONCLUSION / PROPOSAL**

- 4.1 That the information presented in this report in relation to the management of the Minor Capital Works Grants Program be received.

#### **CO-ORDINATION**

Officer: EXECUTIVE GROUP  
Date: 06/09/2016



---

<b>ITEM</b>	7.2.3
	<b>SPORT, RECREATION AND GRANTS COMMITTEE</b>
<b>DATE</b>	12 September 2016
<b>HEADING</b>	Community Grants Program Applications for September 2016
<b>AUTHOR</b>	Bronwyn Hatswell, PA to General Manager, Community Development
<b>CITY PLAN LINKS</b>	3.4 Be a proud, accessible and welcoming community.
<b>SUMMARY</b>	This report outlines the Community Grants Program Applications received for the September 2016 round. Each Application is submitted for review by the Sport, Recreation and Grants Committee in an individual report.

### **RECOMMENDATION**

1. The information be received and noted.

### **ATTACHMENTS**

There are no attachments to this report.

## **1. BACKGROUND**

- 1.1 Five (5) applications were received for the September 2016 round of Community Grants.
- 1.2 Two (2) applications received for the September 2016 round of Community Grants require further information and will be submitted for consideration once the information has been received:
  - 1.2.1 27/2016: Salisbury 8 Ball and Sports Association of SA Inc.
  - 1.2.2 28/2016: Wat Khmer Santipheap Association of SA Inc.
- 1.3 One (1) application received for the September 2016 round of Community Grants is deemed ineligible and listed below:
  - 1.3.1 29/2016: Ingle Farm Women's Group

## **2. CONSULTATION / COMMUNICATION**

- 2.1 Internal
  - 2.1.1 GMCD

### **3. REPORT**

- 3.1 One (1) application is deemed ineligible and presented for the September 2016 round of Community Grants for information:
  - 3.1.1 29/2016: Ingle Farm Women's Group
- 3.2 Two (2) applications are presented for the September 2016 round of Community Grants, all of which are deemed compliant and listed below:
  - 3.2.1 25/2016: Valley View Tennis Club Inc.
  - 3.2.2 26/2016: Salisbury Amateur Athletic Club Inc.
- 3.3 The Community Grant Funding budget allocation for 2016/2017 is \$82,000. In 2016/2017 monies approved for grant funding is \$11,886.00 which leaves an unspent balance of \$70,114.00.
- 3.4 The monies committed to the two (2) compliant applications for the September 2016 round, if all approved, is **\$3,098.00**.
- 3.5 The remaining balance of the grant funding if all two (2) applications are approved is **\$67,016.00**.

### **4. CONCLUSION / PROPOSAL**

- 4.1 Two (2) Community Grants Program applications are presented for funding consideration at the Sport, Recreation and Grants Committee in September 2016.

### **CO-ORDINATION**

Officer: EXECUTIVE GROUP  
Date: 06/09/2016

---

<b>ITEM</b>	7.2.4
	<b>SPORT, RECREATION AND GRANTS COMMITTEE</b>
<b>DATE</b>	12 September 2016
<b>HEADING</b>	25/2016: Valley View Tennis Club Inc. - Community Grants Program Application
<b>AUTHOR</b>	Bronwyn Hatswell, PA to General Manager, Community Development
<b>CITY PLAN LINKS</b>	3.4 Be a proud, accessible and welcoming community.
<b>SUMMARY</b>	The Valley View Tennis Club Inc. Application is submitted to the Sport, Recreation and Grants Committee for consideration.

### RECOMMENDATION

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the September 2016 round of Community Grants as follows:
  - a. Grant No. 25/2016: Valley View Tennis Club Inc. be awarded the amount of **\$598.00** to assist with the purchase of two marquees for ongoing use as outlined in the Community Grant Application.

### ATTACHMENTS

This document should be read in conjunction with the following attachments:

1. 25/2016: Valley View Tennis Club Inc. - Application
2. 25/2016: Valley View Tennis Club Inc. - Additional Information

### 1. BACKGROUND

- 1.1 Valley View Tennis Club Inc. has not received prior Community Grants Program funding.

### 2. CONSULTATION / COMMUNICATION

- 2.1 Internal
  - 2.1.1 GMCD

### 3. REPORT

- 3.1 The Valley View Tennis Club Inc. Application meets the eligibility criteria for the requested Community Grants Program funding.

**4. CONCLUSION / PROPOSAL**

- 4.1 The Valley View Tennis Club Inc. Application is submitted for consideration by the Sport, Recreation and Grants Committee.

**CO-ORDINATION**

Officer: EXECUTIVE GROUP  
Date: 06/09/2016



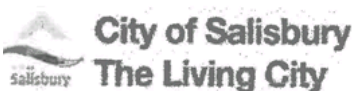


# Community Grants Program

## Application Form

Applications for Community Grants must be received by the 15<sup>th</sup> of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15<sup>th</sup> of February will be assessed at the March Meeting).

**Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.**



*Live it up*

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body <b>or</b> is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and <b>NOT</b> fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*If you have answered **YES** to any of these questions,  
this application is **NOT** eligible for grant funding.*

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Applicant Organisation Information		
<b>1. GROUP / ORGANISATION DETAILS</b>		
Name:	Valley View Tennis Club	
Address:	Elizabeth Street	
Suburb:	Valley View	Postcode: 5093
<b>2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)</b>		
Name:	Mr Aaron Griffiths	
Title (your role with the group/organisation):	Secretary	
Address:	[REDACTED]	
Phone:	Landline: - Mobile: [REDACTED]	
Email:	[REDACTED]	
<b>3. COMMUNITY GRANT RESPONSIBILITY</b>		
Name of Person Responsible for the Grant:	Mr Aaron Griffiths	
Title (role with the group/organisation):	Secretary	
<b>4. GROUP / ORGANISATION MANAGEMENT DETAILS</b>		
How is your group/organisation managed:	A management committee elected by and from members of the club	
<b>Is your organisation:</b>		
a) Incorporated:	<b>Yes</b> <input checked="" type="checkbox"/> (go to question c)	<b>No</b> <input type="checkbox"/> (go to question b)
ASIC Registration Number:	A6306	
b) Operated under a Parent Organisation: (please state which parent organisation you operate under below AND attach a supporting letter from the organisation)	<b>Yes</b> <input type="checkbox"/> (go to question c)	<b>No</b> <input checked="" type="checkbox"/> (go to question c)
<b>Parent Organisation</b>		
Name:		
ASIC Registration Number:		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 3 of 13

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	Yes <input type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input checked="" type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e &amp; f)</i>	Yes <input type="checkbox"/>  (go to question e & f)	No <input checked="" type="checkbox"/>
e) Funding source/s:		
f) Purpose:		
g) Other (please specify):	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<b>5. BANKING INFORMATION</b>		
<i>Your organisation must have its own Bank/Credit Union Account or similar</i>		
Full Account Name: <i>Valley View Tennis Club</i>  <i>*do not provide account or BSB numbers*</i>	Financial Institution Name: [REDACTED]  Branch Location: [REDACTED]	
<b>6. REFEREE INFORMATION</b>		
<i>Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)</i>		
Referee's Name:	<i>Frances Bedford</i>	
Referee's Contact Information:	<i>floreys@parliament.sa.gov.au (08) 8263 2666</i>	

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN <i>(If Yes - Please Quote ABN:)</i>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<i>(If No, the ABN Declaration Form attached must be signed)</i>		
Is your group/organisation registered for GST	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<b>NB: GST Registration</b> <i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i>		

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Community Grant Application - Page 5 of 13



Project/Event Budget Information	
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> <i>(enter '0' dollar amounts below)</i>
<i>if Yes, provide details:</i>	
<b>INCOME</b>	<b>\$ AMOUNT</b>
Project or event generated income:	
Organisation's contribution:	
Income received from other Grants: <i>(list organisation(s) providing Grant funding and their contribution)</i>	
Income received from sponsors: <i>(list sponsor(s) and their contribution)</i>	
Donations: <i>(please specify the source, product or service and estimated amount of funding requested)</i>	
Have you sought any other funding for the project: <i>(please specify the source and amount of funding requested)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>TOTAL (including GST):</b>	<b>\$ 0</b>
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?	-
<b>EXPENSES</b> <i>(specify the proposed expense budget by item:)</i>	<b>\$ AMOUNT</b>
3 metre x 3 metre Marquee	\$ 299
3 metres x 3 metre Marquee	\$ 299
<b>TOTAL (including GST):</b>	<b>\$ 598</b>

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Summary of Project/Event Information	
Is the funding for: (please tick which is applicable)	<input type="checkbox"/> Event <input type="checkbox"/> Project <input checked="" type="checkbox"/> Ongoing <input type="checkbox"/> New Group
Name of Project/Event Requiring Funding	<i>Club Event Infrastructure</i>
Date(s) of Project/Event (if ongoing please state "ongoing")	<i>Ongoing</i>
Total cost of Project/Event	<i>\$ 598</i>
Amount of Community Grant Funding Requested	<i>\$ 598</i>
Is there any other information that you may feel is relevant to your application?	
<input checked="" type="checkbox"/> There are no relevant attachments.	<input type="checkbox"/> There are relevant attachments and the following documents are attached: 1. 2.
<b>Which category best describes your project/event?</b> (please check all that apply)	
Health	<input type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input type="checkbox"/>
Culture / Arts	<input type="checkbox"/>
Sport / Recreation	<input checked="" type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input type="checkbox"/>
Youth	<input type="checkbox"/>
Crime Prevention	<input type="checkbox"/>
Aged	<input type="checkbox"/>

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Community Grant Application - Page 7 of 13

Project/Event Details	
<b>Previous Community Grants Program Funding</b>	
Has your Organisation previously received a Community Grant? (If Yes – when, amount granted and what the grant was for:)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (go to Group/Organisation Information)
When was the Grant funding received (month & year):	
What amount of Grant funding was provided:	
When was the previous Grant acquitted (month & year):	
<b>Group/Organisation Information</b>	
Group/Organisation Name	<i>Valley View Tennis Club Incorporated</i>
Group/Organisation Description	<i>Social and competition tennis for both junior and adult players</i>
Group/Organisation Registered Address	Number/Street: <i>Elizabeth Crescent</i> Suburb: <i>Valley View</i> Postcode: <i>5093</i>
Is the Club Incorporated?	<i>Yes</i>
Number of Members	<i>250</i>
% of Membership that reside in the City of Salisbury	<i>42 %</i>
<b>Project/Event Details</b>	
Project/Event Name	<i>Club Event Infrastructure</i>
Project/Event Summary	<i>Adding infrastructure to assist in hosting events</i>
Date(s) of Project/Event	<i>Ongoing</i>
Location of Project/Event:	Number/Street: <i>Elizabeth Crescent</i> Suburb: <i>Valley View</i> Postcode: <i>5093</i>
How will the Project/Event benefit the residents of the City of Salisbury?	<i>Provide safe environment, increase connection with wider community</i>
How many individuals will benefit from the Project/Event?	<i>250</i>
% of project/event participants that reside in the City of Salisbury	<i>42 %</i>
If it is an Event, is it open to the public?	<i>Yes</i>
How will the Project/Event be promoted?	<i>Emails to members, posts on club Facebook page, signs at club facilities</i>

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*



Community Grant Application - Page 9 of 13

**Project or Event Scope**

Provide a description of the proposed project or event:

*The Valley View Tennis Club is a vibrant & viable community tennis club that facilitates & actively promotes the playing & enjoyment of the game of tennis. In the past 5 years, the club has expanded its membership base, with our total number of members reaching 250.*

*The club currently participates in the North Eastern Tennis Competition in both junior and senior competitions. In juniors we are represented in Pennant, Green Ball, Orange ball and Yellow Ball competitions and have both Singles and Doubles teams in the Senior competition. The club also offers coaching for both junior and senior players.*

*The club hosts a number of events throughout the year other than just the competitions listed above. Both junior and senior club tournaments are held during the year, which are well represented by participants and supporters. Junior functions are held at the club at the completion of each season for both players and families to celebrate the achievements and participation of our junior members. Presentation nights for both juniors and seniors are also held at the club where family and friends of members are encouraged to attend.*

*The club also plays host to events for the wider community. The club continually takes part in the Growing for Gold program, inviting members of the Salisbury community to participate in tennis free of cost. The club has also played host to a number of Tennis SA Junior Development Series tournaments involving players from the wider South Australian tennis community.*

*Currently our clubrooms are not able to cater for the size of some of these events listed above. There is a need to increase our infrastructure to accommodate the number of people attending these events. The club wishes to acquire marquees, that can be used during these events.*

**Attachments**

- ☒ There are no attachments relating to the Project or Event Scope.
- ☐ The following documents are attached relating to the Project or Event Scope:
- 1.
  - 2.
  - 3.

**Benefits and Outcomes of the Project or Event**

Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:



*Whilst our clubs membership and subsequent number of events have grown, our ability to accommodate these members has remained the same. With minimal indoor facilities and shaded areas, both members and supporters are often seated in areas with minimal shade or protection from the weather. The marquees will provide the necessary protection for both members and supporters at club events and assist in our ability to accommodate our growing membership base. The club has determined that 2 smaller marquees would be a more viable option than 1 larger marquee. The smaller options would provide us with more flexibility with the varying size and type of events the club holds. Acquiring these marquees will assist the club in contributing to the objectives of the community grants program by increasing opportunities for increased social activity and community participation at our club.*

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Support for the Project or Event
<p><i>Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:</i></p> <p><i>(Include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.</i></p> <p><i>The club has been shown continued support from the Salisbury Council as our club has grown in size and stature. Due to the small size of our clubrooms and events needing to be held outside, we have been advised by the council to use this grant to purchase a marquee. Our local member for parliament Frances Bedford has also shown support in the club improving its infrastructure to better serve its club members and participation with the wider Salisbury community.</i></p>
<p><b>Attachments</b></p> <p><input checked="" type="checkbox"/> There are no attachments relating to Support for the Project or Event.</p> <p><input type="checkbox"/> The following documents are attached relating to Support for the Project or Event:</p> <ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> </ol>

Project or Event Management
<p><u>Ongoing Projects or Events</u></p> <p><i>Describe how the proposed project or event will be managed into the future:</i>  <i>(outline how you will ensure sustainability and achieve outcomes for the project or activity)</i></p>
<p><u>One-off Projects or Events</u></p> <p><i>Describe how the proposed project or event will be managed:</i>  <i>(outline how you will achieve outcomes for the project or activity)</i></p> <p><i>Before events held at the club are finalised, they must first be brought forward and agreed upon by the committee. Once this has taken place, the planning phase can then assess the number of people who will be in attendance at the event. A decision can be made on the need and number of marquees required.</i></p> <p><i>Responsibility for the marquees at events will rest with committee members in attendance. This will require the marquees to be put up, taken down and stored correctly. Marquees will be stored in our secure storage area to prevent damage when not in use. Cleaning and maintenance will take place on a regular basis to ensure the marquees remain operational and form a longstanding piece of infrastructure for the club.</i></p>

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Application Declaration	
<p><i>Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)</i></p>	
<p>Please read, tick the S1 and S2 boxes and sign:</p>	
S1	S2
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that I am authorised to make this application on behalf of the Organisation.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that the information provided in this application is true and correct.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.
<p>On behalf of <u>Valley View Tennis Club</u> (Group/Organisation)</p>	
<u>GARY CORRY</u> / PRESIDENT <small>(Name/Position)</small>	and <u>Aaron Griffiths</u> / Secretary <small>(Name/Position)</small>
 <small>(Signature 1)</small>	 <small>(Signature 2)</small>
<u>14-7-16</u> <small>(Date)</small>	<u>14/7/16</u> <small>(Date)</small>
Contact (phone number): <div style="background-color: black; width: 100px; height: 15px;"></div>	Contact (phone number): <div style="background-color: black; width: 100px; height: 15px;"></div>

Both signatories will be contacted to verify the application - a contact phone number must be provided for each.  
 Your Application will **not** be submitted until contact and verification has occurred, **no exception**.

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*





## Declaration Where No Australian Business Number is Required

I hereby certify that I am not required under the New Taxation System to hold an Australian Business Number (ABN), as I am not carrying out an enterprise under the New Tax System definition.

I am providing my services as:

	Yes	No
A private recreational pursuit or hobby	<input type="checkbox"/>	<input checked="" type="checkbox"/>
As an <b>individual</b> without a reasonable expectation of profit or gain	<input type="checkbox"/>	<input checked="" type="checkbox"/>

As such the Council is not obliged to withhold 48.5% from payments made to me.

I confirm that the above declaration is valid for all payments made by Council to our organisation. Should the situation change and I am required to hold an Australian Business Number, I will notify Council immediately.

Valley View Tennis Club  
(Group/Organisation)

GARRY OATMAN - PRESIDENT  
(Name/Position)

[Signature]  
(Signature)

14-7-16  
(Date)

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Community Grant Application - Page 13 of 13

24.06.2015

Please note that prices are valid for 14 days as costs can change without warning.  
Also please allow up to 14 days to ensure all stock is available.

<u>PLU</u>	<u>DESCRIPTION</u>	<u>QTY</u>	<u>PRICE</u>	<u>TOTAL</u>
135804	OZ-TRAIL DELUXE GAZEBO 3MX3M	1 only	\$299.00	\$299.00

*Total: \$299.00*



Committee meeting: Thursday 21<sup>st</sup> April 2016 7:00pm

Present: **G. Oaten, J. Zissopoulos, C. Mulroney, T. Pfeiffer, A. Griffiths**

Apologies/Absent: M. Hatchard, G. Hatchard

Minutes of last meeting: Accepted (G. Oaten / C. Mulroney)

**Incoming Mail**

[REDACTED]

**Club Captain:**

[REDACTED]

**Treasurer:**

[REDACTED]

**Canteen:**

1. No new news to report

**Junior Coordinator / Project Manager:**

[REDACTED]

**General Business:**

[REDACTED]

2. A. Griffiths proposed submitting a Community Grant with Salisbury Council for the purchase of 2 gazebos. Passed by all present

[REDACTED]

Meeting Closed 8:45 pm

Next meeting 19<sup>th</sup> May 2016 7:00pm





---

<b>ITEM</b>	7.2.5
	<b>SPORT, RECREATION AND GRANTS COMMITTEE</b>
<b>DATE</b>	12 September 2016
<b>HEADING</b>	26/2016: Salisbury Amateur Athletic Club Inc. - Community Grants Program Application
<b>AUTHOR</b>	Bronwyn Hatswell, PA to General Manager, Community Development
<b>CITY PLAN LINKS</b>	3.4 Be a proud, accessible and welcoming community.
<b>SUMMARY</b>	The Salisbury Amateur Athletic Club Inc. Application is submitted to the Sport, Recreation and Grants Committee for consideration.

### RECOMMENDATION

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the September 2016 round of Community Grants as follows:
  - a. Grant No. 26/2016: Salisbury Amateur Athletic Club Inc. be awarded the amount of **\$2,500.00** to assist with the purchase of uniforms for ongoing use as outlined in the Community Grant Application.

### ATTACHMENTS

This document should be read in conjunction with the following attachments:

1. 26/2016: Salisbury Amateur Athletic Club Inc. - Application

### 1. BACKGROUND

- 1.1 Salisbury Amateur Athletic Club Inc. received \$2,000 Community Grant funding in September 2010 towards the purchase of uniforms for ongoing use.

### 2. CONSULTATION / COMMUNICATION

- 2.1 Internal
  - 2.1.1 GMCD

### **3. REPORT**

- 3.1 The Salisbury Amateur Athletic Club Inc. has requested \$2,000 Community Grants Program funding to assist with the purchase of uniforms. Staff have recommended funding for \$2,500 as a result of Council Resolution 1228/2016; Monday, 25 July 2016 as the quote provided for uniforms is in excess of the recently increased upper limit Community Grants Program funding.
- 3.2 The Salisbury Amateur Athletic Club Inc. Application meets the eligibility criteria for the upper limit Community Grants Program funding.

### **4. CONCLUSION / PROPOSAL**

- 4.1 The Salisbury Amateur Athletic Club Inc. Application is submitted for consideration by the Sport, Recreation and Grants Committee.

### **CO-ORDINATION**

Officer: EXECUTIVE GROUP  
Date: 06/09/2016



# Community Grants Program Application Form

Applications for Community Grants must be received by the 15<sup>th</sup> of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15<sup>th</sup> of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.



City of Salisbury  
The Living City

*Live it up*

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body <b>or</b> is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and <b>NOT</b> fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

***If you have answered **YES** to any of these questions,  
this application is **NOT** eligible for grant funding.***

*to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered***

Community Grant Application - Page 2 of 13

Applicant Organisation Information		
<b>1. GROUP / ORGANISATION DETAILS</b>		
Name:	Salisbury Amateur Athletics Club	
Address:	Rundle Road, Rundle Reserve	
Suburb:	Salisbury South SA	Postcode: 5106
<b>2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)</b>		
Name:	Mr Simon Moran	
Title (your role with the group/organisation):	President	
Address:	[REDACTED]	
Phone:	Landline:	Mobile: [REDACTED]
Email:	[REDACTED]	
<b>3. COMMUNITY GRANT RESPONSIBILITY</b>		
Name of Person Responsible for the Grant:	Mr Simon Moran	
Title (role with the group/organisation):	President	
<b>4. GROUP / ORGANISATION MANAGEMENT DETAILS</b>		
How is your group/organisation managed:	President, Secretary and Treasurer	
<b>Is your organisation:</b>		
a) Incorporated:	<b>Yes</b> <input checked="" type="checkbox"/> (go to question c)	<b>No</b> <input type="checkbox"/> (go to question b)
ASIC Registration Number:	A24281	
b) Operated under a Parent Organisation: <i>(please state which parent organisation you operate under below AND attach a supporting letter from the organisation)</i>	<b>Yes</b> <input type="checkbox"/> (go to question c)	<b>No</b> <input checked="" type="checkbox"/> (go to question c)
<b>Parent Organisation</b>		
Name:		
ASIC Registration Number:		

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Community Grant Application - Page 3 of 13

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	Yes <input type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e &amp; f)</i>	Yes <input type="checkbox"/>  (go to question e & f)	No <input checked="" type="checkbox"/>
e) Funding source/s:		
f) Purpose:		
g) Other (please specify):	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>5. BANKING INFORMATION</b>		
<b><i>Your organisation must have its own Bank/Credit Union Account or similar</i></b>		
Full Account Name: <i>Salisbury Amateur Athletics Club</i> <b><i>*do not provide account or BSB numbers*</i></b>	Financial Institution Name: [REDACTED] Branch Location: [REDACTED]	
<b>6. REFEREE INFORMATION</b>		
<b><i>Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)</i></b>		
Referee's Name:	<i>Adam Bishop</i>	
Referee's Contact Information:	[REDACTED]	

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Community Grant Application - Page 4 of 13

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN  <i>(If Yes - Please Quote ABN:)</i>  1 2 9 3 8 0 6 3 4 5 5 <i>(If No, the ABN Declaration Form attached must be signed)</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your group/organisation registered for GST	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<p><b>NB: GST Registration</b></p> <p><i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i></p>		

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Community Grant Application - Page 5 of 13

Project/Event Budget Information		
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/> <i>(enter '0' dollar amounts below)</i>
If Yes, provide details:		
<b>INCOME</b>	<b>\$ AMOUNT</b>	
Project or event generated income:		
Organisation's contribution:		
Income received from other Grants: <i>(list organisation(s) providing Grant funding and their contribution)</i>		
Income received from sponsors: <i>(list sponsor(s) and their contribution)</i>		
Donations: <i>(please specify the source, product or service and estimated amount of funding requested)</i>		
Have you sought any other funding for the project: <i>(please specify the source and amount of funding requested)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>TOTAL (including GST):</b>	<b>\$ 0</b>	
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?		
<b>EXPENSES</b> <i>(specify the proposed expense budget by item:)</i>	<b>\$ AMOUNT</b>	
<b>Uniform</b>	<b>\$ 3,080</b>	
<b>TOTAL (including GST):</b>	<b>\$ 3,080</b>	

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Community Grant Application - Page 6 of 13



Summary of Project/Event Information	
Is the funding for: <i>(please tick which is applicable)</i>	<input type="checkbox"/> Event <input checked="" type="checkbox"/> Project <input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> New Group
Name of Project/Event Requiring Funding	<i>We are purchasing new uniform under our new name</i>
Date(s) of Project/Event <i>(if ongoing please state "ongoing")</i>	<i>Ongoing</i>
Total cost of Project/Event	<i>\$ 3,080</i>
Amount of Community Grant Funding Requested	<i>\$ 2,000</i>
Is there any other information that you may feel is relevant to your application?	
<input type="checkbox"/> There are no relevant attachments.	<input type="checkbox"/> There are relevant attachments and the following documents are attached: 1. 2.
<b>Which category best describes your project/event?</b> <i>(please check all that apply)</i>	
Health	<input type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input type="checkbox"/>
Culture / Arts	<input type="checkbox"/>
Sport / Recreation	<input checked="" type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input type="checkbox"/>
Youth	<input type="checkbox"/>
Crime Prevention	<input type="checkbox"/>
Aged	<input type="checkbox"/>

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Community Grant Application - Page 7 of 13

Project/Event Details	
<b>Previous Community Grants Program Funding</b>	
Has your Organisation previously received a Community Grant? <i>(If Yes – when, amount granted and what the grant was for:)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(go to Group/Organisation Information)</i>
When was the Grant funding received (month & year):	<i>Unknown - more than two years ago now.</i>
What amount of Grant funding was provided:	
When was the previous Grant acquitted (month & year):	
<b>Group/Organisation Information</b>	
Group/Organisation Name	<i>Salisbury Amateur Athletics Club</i>
Group/Organisation Description	<i>Athletics Club</i>
Group/Organisation Registered Address	Number/Street: <i>Rundle Road, Rundle Reserve</i> Suburb: <i>Salisbury South, SA</i> Postcode: <i>5106</i>
Is the Club Incorporated?	<i>Yes</i>
Number of Members	<i>130</i>
% of Membership that reside in the City of Salisbury	<i>50 %</i>
<b>Project/Event Details</b>	
Project/Event Name	<i>Uniform</i>
Project/Event Summary	<i>Uniform for new partnership</i>
Date(s) of Project/Event	<i>Ongoing</i>
Location of Project/Event:	Number/Street: <i>Rundle Road, Rundle Reserve</i> Suburb: <i>Salisbury South, SA</i> Postcode: <i>5106</i>
How will the Project/Event benefit the residents of the City of Salisbury?	<i>We are working with SELAC to create a cradle to grave aths club</i>
How many individuals will benefit from the Project/Event?	<i>100</i>
% of project/event participants that reside in the City of Salisbury	<i>50 %</i>
If it is an Event, is it open to the public?	<i>No</i>
How will the Project/Event be promoted?	<i>All athletes will be wearing uniform in the City of Salisbury colours</i>

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Community Grant Application - Page 8 of 13

*to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered***

### Project or Event Scope

*Provide a description of the proposed project or event:*

*Salisbury Amateur Athletics and Salisbury East Little Athletics clubs have unanimously voted to start working closer together towards an eventual amalgamation - hopefully to be fully completed next year.*

*Our first step in this process was to go under the one "banner" and we have voted on a new name, and will over the next week select a new logo and uniform.*

*Once this is done, we would like all athletes to compete in the same uniform under our trading name to show the athletics community that we are coming together as one.*

*This will be a fantastic opportunity to open the pathway for junior athletes to progress through to the seniors.*

### Attachments

- ☐ There are no attachments relating to the Project or Event Scope.
- ☐ The following documents are attached relating to the Project or Event Scope:
- 1.
  - 2.
  - 3.

### Benefits and Outcomes of the Project or Event

*Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:*

*Salisbury Amateur Athletics and Salisbury East Little Athletics, coming together as "One Club" will be a first in South Australia, and we are excited for the City of Salisbury to be involved in this fantastic opportunity for all children in this area. It will bring athletes from all around South Australia to our club - the opportunities are endless.*

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Community Grant Application - Page 10 of 13

### Support for the Project or Event

*Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:*

*(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.*

*With our combined club being a "cradle to grave" athletics club - a first in South Australia - this will promote our club and we expect our numbers to increase considerably. How wonderful that Salisbury will be part of this. Athletics South Australia and Little Athletics South Australia have helped us immensely and will do anything for us to make sure this project works.*

### Attachments

- ☐ There are no attachments relating to Support for the Project or Event.
- ☒ The following documents are attached relating to Support for the Project or Event:
1. *Letter of support from SALAA and ASA*
  - 2.
  - 3.

### Project or Event Management

#### Ongoing Projects or Events

*Describe how the proposed project or event will be managed into the future:*

*(outline how you will ensure sustainability and achieve outcomes for the project or activity)*

#### One-off Projects or Events

*Describe how the proposed project or event will be managed:*

*(outline how you will achieve outcomes for the project or activity)*

*All re-registering athletes of Salisbury Amateur and Salisbury East Little Athletics clubs will receive a free uniform, to thank them for their commitment and support towards our eventual amalgamation. All new members will purchase the new uniform.*

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Community Grant Application - Page 11 of 13

Application Declaration	
<p style="color: red; margin: 0;"><b>Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)</b></p>	
<p>Please read, tick the <span style="color: red;">S1</span> and <span style="color: blue;">S2</span> boxes and sign:</p>	
<p><span style="color: red;">S1</span>   <span style="color: blue;">S2</span></p>	
<input checked="" type="checkbox"/>	<input type="checkbox"/> I acknowledge that I am authorised to make this application on behalf of the Organisation.
<input checked="" type="checkbox"/>	<input type="checkbox"/> I acknowledge that the information provided in this application is true and correct.
<input checked="" type="checkbox"/>	<input type="checkbox"/> I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
<input checked="" type="checkbox"/>	<input type="checkbox"/> I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
<input checked="" type="checkbox"/>	<input type="checkbox"/> I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.
<p>On behalf of <u>Salisbury Amateur Athletics CI</u> <span style="color: red;">(Group/Organisation)</span></p>	
<span style="color: red;">Simon Moran / President</span> <small>(Name/Position)</small>	and <span style="color: blue;">Jane Crayford / Grant's Officer</span> <small>(Name/Position)</small>
<p>_____</p> <small>(Signature 1)</small>	<p>_____</p> <small>(Signature 2)</small>
<p>22 July 2016</p> <small>(Date)</small>	<p>22 July 2016</p> <small>(Date)</small>
<small>Contact (phone number):</small> <span style="background-color: black; color: black;">[REDACTED]</span>	<small>Contact (phone number):</small> <span style="background-color: black; color: black;">[REDACTED]</span>

Both signatories will be contacted to verify the application - a contact phone number must be provided for each. Your Application will **not** be submitted until contact and verification has occurred, **no exception**.

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*



## Declaration Where No Australian Business Number is Required

I hereby certify that I am not required under the New Taxation System to hold an Australian Business Number (ABN), as I am not carrying out an enterprise under the New Tax System definition.

I am providing my services as:

	Yes	No
A private recreational pursuit or hobby	<input type="checkbox"/>	<input type="checkbox"/>
As an <b>individual</b> without a reasonable expectation of profit or gain	<input type="checkbox"/>	<input type="checkbox"/>

As such the Council is not obliged to withhold 48.5% from payments made to me.

I confirm that the above declaration is valid for all payments made by Council to our organisation. Should the situation change and I am required to hold an Australian Business Number, I will notify Council immediately.

\_\_\_\_\_  
(Group/Organisation)

\_\_\_\_\_  
(Name/Position)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Community Grant Application - Page 13 of 13



## Application Declaration

**Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)**

Please read, tick the **S1** and **S2** boxes and sign:

**S1** **S2**

- ☒ ☒ I acknowledge that I am authorised to make this application on behalf of the Organisation.
- ☒ ☒ I acknowledge that the information provided in this application is true and correct.
- ☒ ☒ I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
- ☒ ☒ I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
- ☒ ☒ I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.

On behalf of Salisbury Amateur Athletics CI (Group/Organisation)

**Simon Moran / President**  
(Name/Position)

and

**Jane Crayford / Grant's Officer**  
(Name/Position)

(Signature 1)

(Signature 2)

22 July 2016

(Date)

22 July 2016

(Date)

Contact (phone number): [REDACTED]

Contact (phone number): [REDACTED]

**Both signatories will be contacted to verify the application - a contact phone number must be provided for each. Your Application will not be submitted until contact and verification has occurred, no exception.**

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*



Dear members of Salisbury East Little Athletics Centre and Salisbury Amateur Athletics Club,

We are proud to be supporting the committees of the Salisbury East Little Athletics Centre and Salisbury Amateur Athletics Club, as they begin processes to work more closely together, towards a One Club.

This is an exciting time for both the centre, club, and the future of Athletics in South Australia, as we look to grow the sport, and develop a seamless pathway that inspires young people to participate, perform, and be engaged in athletics in a fun and inclusive environment, for life.

We look forward to all members of the centre and club being involved in this process, with an initial meeting being held on **Wednesday 22nd June 2016 at 7.00pm** at the **John Harvey Gallery, 12 James Street, Salisbury 5108**.

Kind Regards,

**Sue Bowman**  
**Little Athletics SA CEO**

**Adam Bishop**  
**Athletics SA CEO**



**Government of South Australia**  
Office for Recreation and Sport

South Australian  
Little Athletics Association  
ABN 40 290 914 982

PO Box 146  
Torrensville Plaza  
SA 5031

Tel 08 8352 8133  
Fax 08 8352 8155  
[office@salaa.org.au](mailto:office@salaa.org.au)

[salaa.org.au](http://salaa.org.au)

Athletics South Australia

ABN 14 661 448 453

PO Box 84  
Torrensville Plaza  
SA 5031

Tel 08 8354 3477  
Fax 08 8354 1219  
[info@athleticssa.com.au](mailto:info@athleticssa.com.au)

[athleticssa.com.au](http://athleticssa.com.au)



7.30pm on Tuesday 19<sup>th</sup> July 2016

**Minutes  
2016/2017 Meeting 3**

## 2. Present:

**3. Apologies:** Josh Ware, Cherie Boxall, Paul Russell, Sam Crayford, Sam Russell, Gary Thompson, Dylan Russell.

4. **Absent:**

## 5. Acceptance of Previous Minutes June, 2016

Acceptance moved by: Jane Crayford

Seconded by: Jenni Densi

## Action Items

[illegible]

**Item 7.2.5 - Attachment 1 - 26/2016: Salisbury Amateur Athletic Club Inc. - Application**

**Quote**

Date: 21/07/2016  
 Order No: Salisbury Amateur  
 Page: 1  
 Invoice #: 00063555

**Invoice To:**

Salisbury Amateur Athletics Club  
 Rundle Reserve  
 Salisbury South SA 5106

**Deliver To:** Business

Salisbury Amateur Athletics Club  
 Rundle Reserve  
 Salisbury South SA 5106  
 Att: Simon Moran 0414 254 132

**Ship Via:**

QTY.	ITEM NO.	DESCRIPTION	PRICE	DISC	UNIT	TOTAL	TAX
100	SUNDRY 2	Sublimated Singlets	\$28.00		EA	\$2,800.00	GST

**Terms:** C.O.D.

SUB TOTAL

\$2,800.00

**Bank Details:**

TAX

\$280.00

FREIGHT

\$0.00

PAID TO DATE

\$0.00

TOTAL

\$3,080.00

---

<b>ITEM</b>	7.2.6
	<b>SPORT, RECREATION AND GRANTS COMMITTEE</b>
<b>DATE</b>	12 September 2016
<b>HEADING</b>	29/2016: Ingle Farm Women's Group - Community Grants Program Application
<b>AUTHOR</b>	Bronwyn Hatswell, PA to General Manager, Community Development
<b>CITY PLAN LINKS</b>	3.4 Be a proud, accessible and welcoming community.
<b>SUMMARY</b>	The Ingle Farm Women's Group Application is submitted to the Sport, Recreation and Grants Committee for information.

#### **RECOMMENDATION**

1. The information be received and noted.

#### **ATTACHMENTS**

This document should be read in conjunction with the following attachments:

1. 29/2016: Ingle Farm Women's Group - Application

#### **1. BACKGROUND**

- 1.1 The Ingle Farm Women's Group received \$1,000 Community Grant funding in May 2007 towards expenses for tutors, speakers and print advertising for the term three and four focus on Women's Health and Wellbeing.
- 1.2 At its meeting held 24 March 2014, Council resolved:

##### ***7.2.1 Community Grant Eligibility Criteria Relating to Non-Incorporated Bodies***

1. *That the information be noted.*
2. *The community grant program guidelines and eligibility criteria documentation be altered to stipulate that non-incorporated bodies or groups/organisations that do not have a parent incorporated body are ineligible to receive grant funding to reduce the financial risks to council.*

*Resolution Number 2267*

## **2. CONSULTATION / COMMUNICATION**

### **2.1 Internal**

#### **2.1.1 GMCD**

## **3. REPORT**

3.1 The Ingle Farm Women's Group Application has been assessed against the Community Grants Program Guidelines and Eligibility Criteria clause 8. *Eligibility to Apply*. The Application is deemed **ineligible** as the group is not established as a legally constituted incorporated organisation nor can it demonstrate they are auspiced by an incorporated organisation who will take legal and financial responsibility for any grant monies received from the City of Salisbury.

3.2 The Ingle Farm Women's Group received Community Grants Program funding prior to Council Resolution number 2267 outlined in reference 1.2 of this report.

3.3 Communication has been sent to the Ingle Farm Women's Group to encourage the submission of a new application for a future event or project should their eligibility circumstances change or they can demonstrate an incorporated organisation will auspice the group's application.

## **4. CONCLUSION / PROPOSAL**

4.1 The Ingle Farm Women's Group Application is submitted to the Sport, Recreation and Grants Committee for information.

## **CO-ORDINATION**

Officer: EXECUTIVE GROUP

Date: 06/09/2016





# Community Grants Program

## Application Form

Applications for Community Grants must be received by the 15<sup>th</sup> of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15<sup>th</sup> of February will be assessed at the March Meeting).

**Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.**



*live it up*

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
• Groups/organisations that have previously received funding and <b>NOT</b> fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*If you have answered **YES** to any of these questions,  
this application is **NOT** eligible for grant funding.*

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Community Grant Application - Page 2 of 13

Applicant Organisation Information		
1. GROUP / ORGANISATION DETAILS		
Name:	INGLE FARM WOMEN'S GROUP.	
Address:	INGLE FARM RECREATION CENTRE, BEOVICH RD.	
Suburb:	INGLE FARM S. AUS.	Postcode:
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)		
Name:	MRS. JULIE ASHTON	
	Mr <input type="checkbox"/> Mrs <input checked="" type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/>	
Title (your role with the group/organisation):	SECRETARY.	
Address:	[REDACTED]	
Phone:	Landline:	[REDACTED]
	Mobile:	[REDACTED]
Email:	[REDACTED]	
3. COMMUNITY GRANT RESPONSIBILITY		
Name of Person Responsible for the Grant:	MRS JULIE ASHTON.	
	Mr <input type="checkbox"/> Mrs <input checked="" type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/>	
Title (role with the group/organisation):	SECRETARY.	
4. GROUP / ORGANISATION MANAGEMENT DETAILS		
How is your group/organisation managed:	(INGLE FARM WOMEN'S GROUP) FINANCIAL MEMBERS (62 IN 2015-16) COMMITTEE OF 8 MEMBERS.	
Is your organisation:		
a) Incorporated:	Yes <input type="checkbox"/> (go to question c)	No <input checked="" type="checkbox"/> (go to question b)
ASIC Registration Number:		
b) Operated under a Parent Organisation: (please state which parent organisation you operate under below AND attach a supporting letter from the organisation)	Yes <input type="checkbox"/> (go to question c)	No <input checked="" type="checkbox"/> (go to question c)
Parent Organisation		
Name:		
ASIC Registration Number:		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 3 of 13



Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	Yes <input type="checkbox"/> <small>(evidence must be attached to this application)</small>	No <input checked="" type="checkbox"/>
d) Government Funded: <small>(If Yes, please list funding source/s and purpose in part e &amp; f)</small>	Yes <input type="checkbox"/>  <small>(go to question e &amp; f)</small>	No <input checked="" type="checkbox"/>
e) Funding source/s:	MEMBERS CONTRIBUTION / FUND RAISING.	
f) Purpose:	TO PROVIDE A COMMUNITY SERVICE TO WOMEN IN THE AREA	
g) Other (please specify):	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. BANKING INFORMATION		
Your organisation must have its own Bank/Credit Union Account or similar		
Full Account Name: INGLE FARM WOMEN'S GROUP <small>*do not provide account or BSB numbers*</small>	Financial Institution Name: [REDACTED]  Branch Location: [REDACTED]	
6. REFEREE INFORMATION		
Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee).		
Referee's Name: HER WORSHIP THE MAYOR GILLIAN ALDRIDGE,		
Referee's Contact Information: CITY OF SALISBURY,		

IMPORTANT INFORMATION -  
THE INGLE FARM WOMEN'S GROUP (PREVIOUSLY THE INGLE FARM WOMEN'S COMMUNICATION GROUP) IS CELEBRATING 40 YEARS SERVICE TO THE WOMEN IN THE COMMUNITY ON 22ND OF SEPTEMBER, 2016. THE MAYOR OF SALISBURY, HER WORSHIP THE MAYOR GILLIAN ALDRIDGE WILL BE ATTENDING ON THE DAY.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 4 of 13



Stratco Pty Ltd  
129-131 Tolley Rd  
St Agnes South Australia 5097  
Telephone: 0882658700  
Facsimile: 0882658777  
ABN: 30 007 528 850

## QUOTATION

Reference: 15993243

Printed on Friday, 12 August 2016

Customer Name	INGLE FARM WOMENS GROUP	Customer Address	C/O JULIE ASHTON, P: 0428026056	
Quote Date	12/08/2016	Quote Reference	15993243	
Sales Person	MATTHEW BATES	Customer Order No.	---	
ITEM CODE	PRODUCT DESCRIPTION	QTY / LENGTH	TOTAL QTY	PRICE
HT-6399	CABINET METAL 2 DR 1680X760X380MM	1 EA	1.000 each	\$168.99
				TOTAL (inc. GST) \$168.99



### Colours

Colour availability varies in each state, please contact Stratco and refer to the product colour charts on the Stratco website at [www.stratco.com.au](http://www.stratco.com.au) to determine if a particular colour is available in your product selection.

### Comments

Thank you for the opportunity to provide a quotation for your project. This quote is valid for 30 days only and will be subject to any price changes resulting from alterations to our material, labour or incidental costs. This quote is subject to Stratco being able to obtain sufficient materials to complete your project.

### CONDITIONS

Estimates are based on quantities taken from drawings only. STRATCO will not be responsible for any variations to quantity, but client will be charged at rates shown for actual requirements. Please check that the information contained herein agrees with plan and specification. The responsibility for the

**Officeworks** 

www.officeworks.com.au  
Officeworks Gilles Plains  
PH: (08) 8369 9400

iceworks Ltd ABN 36 004 763  
TE (Q1 2016/17) 10/08/2

\*\*\*\*\*

**QUOTE**

(valid for 30 days from date of issue)

\*\*\*\*\*

BX130	\$547
PERSON EB-X130 XGA PROJECTOR	
=====	
AL	\$547
Included in Total	\$49
ST Free item	

-----

ase retain receipt for returns/exchange

Team Member: Hollie

**WE CAN  
EMAIL  
YOUR RECEIPT**



10/08/2016 4:33:38 PM 9058507001825419

Tell us what you think  
To provide feedback go to  
officeworks.com.au/507





Project/Event Budget Information		
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If Yes, provide details:		
INCOME	\$ AMOUNT	
Project or event generated income:	\$	
Organisation's contribution:	\$	
Income received from other Grants: (list organisation(s) providing Grant funding and their contribution)	\$	
Income received from sponsors: (list sponsor(s) and their contribution)	\$	
Donations: (please specify the source, product or service and estimated amount of funding requested)	\$	
Have you sought any other funding for the project: (please specify the source and amount of funding requested)	\$	
TOTAL (including GST):	\$	
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?	THE COMMITTEE WILL BE RESPONSIBLE IN SETTING UP THE STORAGE CUBOARD IN THE REC. CTRE. OF PROJECT	
EXPENSES (specify the proposed expense budget by item:)	\$ AMOUNT	
ERSON EBX130 X 9A. DIGITAL PROJECTOR.	\$547.00. (ESTIMATE)	
STRATCO 2 DOOR METAL CABINET KEY LOCKABLE	\$169.00 (ESTIMATE)	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
TOTAL (including GST):	\$ 716.00. (ESTIMATE)	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 6 of 13

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN  <small>(If Yes - Please Quote ABN:)</small>  ----- <small>(If No, the ABN Declaration Form attached must be signed)</small>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Is your group/organisation registered for GST	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<p><b>NB: GST Registration</b></p> <p><i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i></p>		

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

Community Grant Application - Page 5 of 13

Summary of Project/Event Information	
Is the funding for: <small>(please tick which is applicable)</small>	<input type="checkbox"/> Event <input checked="" type="checkbox"/> Project <input checked="" type="checkbox"/> Ongoing <input type="checkbox"/> New Group
Name of Project/Event Requiring Funding	PROPERTY PURCHASE.
Date(s) of Project/Event <small>(If ongoing please state "ongoing")</small>	"ONGOING" USE OF EQUIPMENT.
Total cost of Project/Event	\$ 716.00 (ESTIMATED)
Amount of Community Grant Funding Requested	\$ 800.00.
Is there any other information that you may feel is relevant to your application?	IT WILL BE TO THE ADVANTAGE OF MEMBERS TO HAVE A PROJECTOR FOR POWER POINT PRESENTATIONS.
<input checked="" type="checkbox"/> There are no relevant attachments.	<input type="checkbox"/> There are relevant attachments and the following documents are attached: 1. 2.
Which category best describes your project/event? <small>(please tick all that apply)</small>	
THE CLUB COVERS THESE SUBJECTS (WITH GUEST SPEAKERS)	
Health	<input checked="" type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input checked="" type="checkbox"/>
Culture / Arts	<input checked="" type="checkbox"/>
Sport / Recreation	<input type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input checked="" type="checkbox"/>
Youth	<input type="checkbox"/>
Crime Prevention	<input type="checkbox"/>
Aged	<input checked="" type="checkbox"/>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 7 of 13



Project/Event Details		
<b>Previous Community Grants Program Funding</b>		
Has your Organisation previously received a Community Grant? (If Yes – when, amount granted and what the grant was for:)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No (go to Group/Organisation Information)
When was the Grant funding received (month & year):	MANY YEARS AGO.	
What amount of Grant funding was provided:	\$ 2,000-00 APPROXIMATELY	
When was the previous Grant acquitted (month & year):	UNKNOWN.	
<b>Group/Organisation Information</b>		
Group/Organisation Name	INGLE FARM WOMEN'S GROUP	
Group/Organisation Description	COMMUNITY	
Group/Organisation Registered Address	Number/Street: INGLE FARM REC. CENTRE BEOVICH RD, Suburb: INGLE FARM Postcode:	
Is the Club Incorporated?	NO	
Number of Members	62	
% of Membership that reside in the City of Salisbury	85% approximately.	
<b>Project/Event Details</b>		
Project/Event Name	CLUB PROPERTY;	
Project/Event Summary	PURCHASE OF EQUIPMENT (PROTECTOR ETC).	
Date(s) of Project/Event	PURCHASE OF + AS SOON AS POSSIBLE	
Location of Project/Event:	Number/Street: INGLE FARM REC CTRE. BEOVICH RD. Suburb: INGLE FARM Postcode:	
How will the Project/Event benefit the residents of the City of Salisbury?	PROVIDES A SERVICE TO THE COMMUNITY (MATURE WOMEN)	
How many individuals will benefit from the Project/Event?	APPROX. 35-40 WOMEN ATTEND EACH WEEK.	
% of project/event participants that reside in the City of Salisbury	85% approximately.	
If it is an Event, is it open to the public?	OPEN TO ALL WOMEN IN THE COMMUNITY EACH WEEK.	
How will the Project/Event be promoted?	OUR CLUB IS PROMOTED IN THE MESSENGER PRESS.	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 8 of 13

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*

**Project or Event Scope**

Provide a description of the proposed project or event:

FOR THE PURCHASE OF A PROJECTOR FOR POWER POINT PRESENTATIONS + FILM. + A STEEL CABINET. GUEST SPEAKERS ARE BOOKED WEEKLY AND THIS WOULD BE OF MUCH BENEFIT TO ALL MEMBERS. (APPROXIMATELY 35-40 MEMBERS EACH WEEK ARE IN ATTENDANCE.) TO BE ABLE TO PRESENT A POWER POINT PRESENTATION.

**Attachments**

- ☐ There are no attachments relating to the Project or Event Scope.  
☒ The following documents are attached relating to the Project or Event Scope:

1. See previous photo (attached)
- 2.
- 3.

**Benefits and Outcomes of the Project or Event**

Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:

AS THE WOMEN'S GROUP IS CELEBRATING ITS 40TH ANNIVERSARY ON 22ND OF SEPTEMBER 2016. IT WILL NOT ONLY BENEFIT CURRENT MEMBERS BUT OTHERS IN YEARS TO COME. IT (THE CLUB) HAS SERVED THE COMMUNITY WELL IN THE SALISBURY COUNCIL AREA OVER 40 YEARS AND IS ESTABLISHED TO BE ABLE TO SERVE HOPEFULLY FOR THE NEXT 40 YEARS.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 10 of 13



## Support for the Project or Event

Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:

(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.

We Worship the Mayor Gillian Aldridge  
The Hon. Tony Zappia MHR. City of Salisbury.

Have supported the Ingle Farm Women's Grp.  
(previously the Ingle Farm Women's Commu-  
ication group.)

## Attachments

- ☐ There are no attachments relating to Support for the Project or Event.  
☒ The following documents are attached relating to Support for the Project or Event:

1. See previously.
- 2.
- 3.

## Project or Event Management

Ongoing Projects or Events

Describe how the proposed project or event will be managed into the future:  
(outline how you will ensure sustainability and achieve outcomes for the project or activity)

One-off Projects or Events

Describe how the proposed project or event will be managed:  
(outline how you will achieve outcomes for the project or activity)

As detailed, it is extremely import to the  
community that such an organisation  
to support mature women is encouraged  
to continue for many years to come.

A committee  
is dedicated  
to its governance

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 11 of 13

Application Declaration	
<p><i>Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)</i></p>	
<p>Please read, tick the S1 and S2 boxes and sign:</p>	
S1	S2
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
I acknowledge that I am authorised to make this application on behalf of the Organisation.	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
I acknowledge that the information provided in this application is true and correct.	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.	
<p>On behalf of <u>INGLE FARM WOMEN'S GROUP</u> (Group/Organisation)</p>	
<u>JULIE ASTON / SECRETARY</u> <small>(Name/Position)</small>	<u>and DEBORAH COLLINS / VICE PRESIDENT</u> <small>(Name/Position)</small>
<u>J.E. Aston</u> <small>(Signature 1)</small>	<u>D.E. Collins</u> <small>(Signature 2)</small>
<u>9/8/2016</u> <small>(Date)</small>	<u>9-8-2016</u> <small>(Date)</small>
Contact (phone number):	Contact (phone number):

Both signatories will be contacted to verify the application - a contact phone number must be provided for each. Your application will not be submitted for consideration until contact and verification has occurred, **no exception**.

*to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered*





## Declaration Where No Australian Business Number is Required

I hereby certify that I am not required under the New Taxation System to hold an Australian Business Number (ABN), as I am not carrying out an enterprise under the New Tax System definition.

I am providing my services as: SECRETARY

	Yes	No
A private recreational pursuit or hobby	<input type="checkbox"/>	<input type="checkbox"/>
As an <b>individual</b> without a reasonable expectation of profit or gain	<input checked="" type="checkbox"/>	<input type="checkbox"/>

As such the Council is not obliged to withhold 48.5% from payments made to me.

I confirm that the above declaration is valid for all payments made by Council to our organisation. Should the situation change and I am required to hold an Australian Business Number, I will notify Council immediately.

INGLE FARM WOMEN'S GROUP  
(Group/Organisation)

MRS. JULIE ASHTON / SECRETARY  
(Name/Position)

J Ashton  
(Signature)

9/8/16.  
(Date)

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 13 of 13