Outstanding Representative Donation

* indicates a required field

Introduction The City of Mandurah provides funding support to local Mandurah residents who are selected to represent their state or nation in sport and recreation activities.

Purpose of Grant To assist residents of Mandurah with the cost involved with travel and accommodation for interstate or overseas trips associated with selection in a state or national team.

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

Application Number This field is read only.

Assessment Criteria

All applicants will be assessed on the following criteria:

- Residency in the City of Mandurah
- Have been selected by the State or National Sporting body to represent Western Australia or Australia
- A clear selection process entitling the person to represent the State or National body must be demonstrated.
- A letter of selection from that State or National sporting governing body
- Representatives in receipt of other sources of funding are eligible as long as there is no surplus income from the donation.

Application Process

Applications are open all year round. All criteria in this application form must be completed.

Applicants must attach a letter from their state or national sporting body to verify their selection.

Applicants may be contacted to clarify any queries regarding their applications. All applicants are advised of the outcome of their application in writing within twenty-one (21) days of submission.

Successful applicants are encouraged to send an email to the City advising of how the event went and how the money assisted them

Grant Amounts

The maximum grant available to representatives if the competition is interstate is \$200.00.

Sporting competitions held within Western Australia will only be considered at the discretion of the Manager.

The grant is capped at \$1,000.00 for representatives from the same Club requesting funding for the same competition in any one financial year.

This amount will be paid to the Club to be distributed to the applicants.

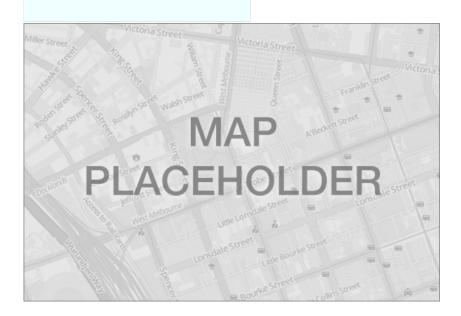
Eligibility

Please confirm the following eligibility ...

- Applicant has gained the highest level of state or national representation in a junior, open, or masters competition.
- Applicant resident of the City of Mandurah.
- Representatives are only eligible for this donation once in a financial year.
- Retrospective funding is not available and applications must be made before the event.
- Representatives include athletes, coaches, officials and administrators.

Please select below: *	o. Na
Yes You must confirm that all statements above are tr	O No ue and correct.
	sentative donation from us in a previous
year? *	O No
○ Yes	○ No
Contact Details	
* indicates a required field	
Applicant Details	
Applicant * ○ Individual ○ Organisation Organisation Name	
○ Individual ○ Organisation	
○ Individual ○ Organisation	
Organisation Organisation Name Title First Name Last Name	
○ Individual ○ Organisation Organisation Name	ne Team/Club Name
Organisation Organisation Name Title First Name Last Name For teams: please select organisation and enter the	ne Team/Club Name
Organisation Organisation Name Title First Name Last Name	e Team/Club Name
Organisation Organisation Name Title First Name Last Name For teams: please select organisation and enter the	ne Team/Club Name

Applicant primary address Address



Applicant postal address

Address	 	

Applicant primary phone number *

Must be an Australian phone number.

Applicant email address *

Must be an email address.

State Sporting Association

* indicates a required field

Name of State Sporting Association? *

In order to qualify for the donation, you must attach a letter of selection from your state sporting association, confirming the following:

• Competition you have been selected for

• Location of the competition

Payment Method

 Date of the competition 			
Please upload letter of selection Attach a file:	on *		
Max 25mb per file uploaded			
Funding			
Please list funding assistance avail	able from o	other means: (state bo	dy, club, fundraising etc)
Funding Assistance		\$	
		\$	
		\$	
		\$	
		\$	
		\$ \$	
		\$ \$	
		\$ \$	
Please state the specific purpo	ses for w	hich the funding is t	o be used: *
Competition Details			
Which competition have you be	een select	ed for? *	
Date of the competition *			
Location of the competition *			
Bank Details			

Please enter the bank account details for payment of the donation, if you are successful with the application.

Bank Account Account Name	
BSB Number	Account Number
Must be a valid Au	stralian bank account format.

Certification and Feedback

* indicates a required field

Certification

I certify that to the best of my knowledge, the statements made within this application are true and correct. Please provide details of your sporting club representative, please note this person may be contacted to verify the information included in this application.

l agree *	○ Yes		○ No	
Local Sporting Club Name:	Organisation Name			
	Sporting Cl	ub or Association Na		
Club Representative Name *	Title	First Name	Last Name	
	senior staff member, volunteer	board member or a	appropriately	
Position *				
	Position held in organisation (e.g. President, Treasurer, Coach)			urer, Coach)
Contact phone number *				
	Must be an Australian phone number. We may contact you to verify that this application is authorised by the applicant organisation			is authorised
Contact Email *				
	Must be an	email address.		
Date *				
	Must be a d	date		

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on process:	
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lete this applicati	ion? *
improvements a think we need to	
	on process: Difficult lete this application improvements a