

# Burke Shire Council Donations Request Form

**NOTE:** To be considered for Donations from Burke Shire Council please complete and submit this form to the Council.



<b>(1) Mail:</b> Community & Communications Manager Burke Shire Council PO Box 90 Burketown QLD 4830	<b>(2) Email:</b> <a href="mailto:office@burke.qld.gov.au">office@burke.qld.gov.au</a>  Subject: Donations	<b>(3) Fax:</b> 4745 5181  Attention: Shannon Moren
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## **Section A:** About your organisation

**Organisation Name:**

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**Purpose or Function:**

**Structure:**

Is the organisation a legally incorporated non-profit organisation?

*Please tick one*  
 Yes     No

Do you have a management committee?  
(e.g. President, treasurer, secretary)

*Please tick one*  
 Yes     No

*If yes, please fill in details:*

**President Name:** \_\_\_\_\_

**Treasurer Name:** \_\_\_\_\_

**Secretary Name:** \_\_\_\_\_

*If no, explain the organisations decision making process:*  
(Attach addition sheets of paper if needed)



**How long has the organisation been established?**

 years

**Does your organisation have members?**

*Please tick one*  
 Yes     No

*If yes, how many?*

**Where are your organisation members from?**

(eg. Burke Shire, Gregory, Burke Shire School Children etc.)

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Contact information for project proposal:

<b>Contact Name:</b>	
<b>Position:</b>	
<b>Address:</b>	
<b>Phone:</b>	
<b>Fax:</b>	
<b>Email:</b>	

**Section B:** About the project

**Project Title:**

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**Project Summary:**

(if an event include: date, venue, time etc.)

**How will the project benefit Burke Shire communities?**

(Describe below)

**Who will participate in this project?**

*If an event, who is the target audience?*

**Donation support requested:**

Cash

In-kind

Both

*Please tick one*

*If cash, what is the amount? (Not including GST)*

\$

**Please note that all requests over \$1,000 (cash or in-kind) will require your current financial audited statement to be attached to this submission.**

Please tick one

**Do you require rubbish collection support from council?**

(Classed as a Council in-kind activity at no cost to the community organisation)

Yes  No

**Describe the support you would like from the Council and the dates/times the support is to be completed**

**Describe how Council support will be recognised and acknowledged:**

**Has Council supported this project in past years?**

Please tick one  
 Yes  No

What was the value of the last Council contribution made to this organisation?

\$

What was the date of this contribution?

<i>D</i>	<i>D</i>		<i>M</i>	<i>M</i>		<i>Y</i>	<i>Y</i>	<i>Y</i>	<i>Y</i>

**Your Contribution:**

What are you contributing towards the project?  
(Not including GST)

(a) Own cash contribution \$

(b) Own in-kind contribution \$   
(For volunteer labour costs calculate at \$30 per hour)

**Total contribution:** \$

**Other Contributions:**

(a) Total contribution from others \$   
(e.g. Other funding sources)

**List sources**

(e.g. Local business sponsorship, Department of Communities, entry fee from participants, corporate sponsorship etc.)

**Total project cost**  
(council + your + other contributions)

\$

**Any other information you think is relevant to this application?**  
(e.g. Supporting documents, programmes, flyers/advertisements)

**Section C:** Other information

**Australian Business Number (ABN) or Australian Company Number (ACN):**

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**If an organisation, is your organisation:**

(a) *GST registered?*

*Please tick one*  
 Yes     No

(b) *Incorporated?*

*Please tick one*  
 Yes     No

*If yes, please provide the incorporation number and year of incorporation:*

**Incorporation number:**

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**Date of incorporation:**

<i>D</i>	<i>D</i>	<i>M</i>	<i>M</i>	<i>Y</i>	<i>Y</i>	<i>Y</i>	<i>Y</i>		

**Covered by public liability?**

*Please tick one*  
 Yes     No

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## Terms and Conditions

Submitting a Burke Shire Council Donation Request Form indicated that you understand and accept the following:

1. Completing and submitting an Request Form in no way guarantees funding.
  2. Burke Shire Council:
    - are not, and will not be, responsible or liable for the accuracy or completeness of any information in, or provided in connection with, this Request Form;
    - accept no liability for any loss or damage suffered by any person as a result of that person, or any other person placing reliance on the contents of this Request Form, the Program Guideline or any other information provided by Council;
    - reserves the right to exclude any application that does not meet the intent of the Burke Shire Council Donation Request Form;
    - reserves the right to clarify information provided in this application;
    - reserves the right to request reports on money spent and audited books;
    - reserves the right to verify the organisation spending to certify money is being spent on specifications outline in the submitted form;
    - must be acknowledged in all promotional and event/related materials;
    - must be advised of any changes to the agreed application and conditions and pre-approve additional changes before they are commenced.
  3. The applicant must make sure all licensing and permits are complied with.
  4. The applicant must supply a final report on completion of the event/project or function.
  5. In the result of cancellation of the funded event/project Burke Shire Council is to be advised immediately and all funding is to be returned.
  6. Failure to comply with these terms and conditions may jeopardise future applications.
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## Certification

I undersigned, certify that

- I am able to commit the organisation to the project as described
- I have completed all questions on the application form to the best of my ability
- The information contained in the application is true and correct to the best of my knowledge

I understand and agree to the above Certification and Terms and Conditions:

Signature \_\_\_\_\_

Print name \_\_\_\_\_

Position \_\_\_\_\_

Date \_\_\_\_\_

### Witness

(Must be over 18 years of age)

Signature \_\_\_\_\_

Print name \_\_\_\_\_

Position \_\_\_\_\_