**Application form**

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| **Applicant Details** |  |
| Name of Club/Association/Organisation:  |  |
| Address: |  |
| Applicant name (person submitting application on behalf of Club/Association/Organisation) |  |
| Applicant/s email: |  |
| Applicant/s phone number:  |  |
| Website/social media: |  |
| **Insurances**  |  |
| Certificate of Currency for Public Liability – A Public minimum cover of $20,000,000 is to be supplied by providers. | Policy Number:Policy Expiry:Policy Amount: |
| **Child Safety** |  |
| Working with Children Check | Working with Children Checks are required for all people involved in delivering activations involving children. Confirmation of compliance will be required if notified of successful application. |

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| **QUESTIONS:** |  |
| Q1. Description of proposed activation? |  |
| Q2. How does your project align with the aims\* of Active Fest? \*Listed in Point 2. of this EOI |  |
| Q3. How does your activation plan to achieve expected Active Fest outcomes\*?\*Listed in Point 4. of this EOI |  |
| * Q4. How can your activation provide a pathway into continual participation in sport or recreation and how will you promote the local clubs, associations or providers available in the local area to highlight ongoing participation opportunities in your sport or recreation activity.
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| Q5: Please provide an itemised budget outlining the Types of Support (listed in Point 6.) which you require for your activation and the expected associated costs. * Coaches/ Instructors/ Development Officers
* Additional staffing
* Additional or modified equipment
* Supported inducements
* Total project cost
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**Submissions due: COB Wednesday 29 March 2023**

**What’s next?**

Please email your application to adam.kidd@centralcoast.nsw.edu.au

All applicants will be notified via email of the outcome of their application.

Successful applicants will be required to complete a participation agreement and invoice Central Coast Council for the agreement amount to execute their plan.

**Payment Details**

Invoices are to be emailed to adam.kidd@centralcoast.nsw.edu.au. All funds will be electronically transferred into the nominated bank account.

Invoice must include:

* an ABN if registered
* if you are GST registered or not
* Contact details
* A brief outline of the project
* Bank details
* Completed acquittal template (to be provided)

**Contact**

For more information, please contact Council’s Representative for this agreement Adam Kidd, Sports Activation and Development Officer, at adam.kidd@centralcoast.nsw.gov.au or 0427 175 234.