



COMMUNITY EVENTS FUND

APPLICATION FORM

BEFORE YOU START: please look at the Community Events Fund Information Sheet to help you complete this form.

Have you applied to the Community Events Fund before? YES NO

If yes, have you returned your Accountability Form? YES

Please attach the following supporting documents:



- Bank verified account details (for the account to which any grant will be paid)
- Latest annual accounts & latest monthly financial statement (if applicant is an organisation)
- Event description (as per question 11)
- Relevant quotes
- Any additional information you wish to provide in support of your application (optional)

ⓘ Not providing supporting documentation may result in your application being returned to you.

Completed applications can be:

POSTED TO:	PO Box 444, Masterton 5840	DELIVERED TO:	161 Queen Street, Masterton	EMAILED TO:	admin@mstn.govt.nz
-------------------	-------------------------------	----------------------	--------------------------------	--------------------	--------------------

Please complete all sections of the application that apply. (Please do not bind your application)

A. GENERAL DETAILS

1. Is this funding application for an event run by an organisation or individual? ORGANISATION INDIVIDUAL

2. Name of organisation or individual applying for the event:

Postal Address:		Phone:	
Email:			

3. If an organisation, the name of the person responsible for this application:

Name:		Position:	
Email:		Phone:	

4. If you are an individual, please provide the name of another person who will retain equal responsibility for ensuring the event is carried out and funds are spent appropriately:

Name:		Position:	
Email:		Phone:	

5. Is your organisation a legally-constituted society or trust? YES NO

6. Is your organisation registered for GST? YES NO GST No.





7. Bank account name and number
 / /

8. What assets (all bank accounts and investments) does your organisation hold as of 31 Mar 2021; or this date of / /20 [enter the date and year] \$

B. INFORMATION ABOUT YOUR EVENT

9. Please tick the wellbeing area(s) that your project will contribute to:

(Please refer to the Community Events Fund Information Sheet for more detail about these wellbeing areas)


WELLBEING DEVELOPMENT AREA (PLEASE TICK)			
 Social	 Cultural	 Environmental	 Economic
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Please tick the event category for your event:

(Please refer to the Community Events Fund Information Sheet for more details regarding event categories)

EVENT CATEGORY (PLEASE TICK)		
Major events with economic benefit	Local and targeted events with community benefit	Emerging event
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Please attach a description of your event including:

	<input type="text"/>	When and where it will take place, and the frequency it will be held in Masterton/Wairarapa
	<input type="text"/>	Anticipated number of active participants
	<input type="text"/>	Anticipated audience number
	<input type="text"/>	Where those people are expected to be coming from
	<input type="text"/>	Explain any risks associated with the event (financial, public safety etc.)
	<input type="text"/>	If you received council funding for this event in a previous year, a brief summary on the event detailing the number of participants and audience, and a financial summary.

C. INFORMATION ABOUT YOUR EVENT COSTS

12. Please tell us about your event costs

Total cost? (<i>excl. GST - please attach relevant budget and/or quotes</i>)	\$
Your contribution (<i>excl. GST</i>)	\$
How much are you applying for? i.e. total request (<i>excl. GST</i>)	\$

13. What will the grant be spent on and what is the organisation's contribution?

Please continue on a separate sheet if necessary

EVENT COST <i>List the major costs associated with this event</i>	AMOUNT	EVENT INCOME/CONTRIBUTION <i>How the organisation plans to contribute (including fees, grants, reserves, and sponsorship)</i>	AMOUNT
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
Total cost of event	\$	Total projected organisation income	\$

14. If your application is for funding of **\$3,001 or more**, do you wish to speak in support of your application at the Awards and Grants Committee meeting?

YES

NO

15. What funding have you applied for, intend to apply for or have already received for this event in your current financial year from other organisations/Councils?

FUNDER	AMOUNT REQUESTED	AMOUNT RECEIVED	RESULT DATE

D. DECLARATION AND CONSENT UNDER PRIVACY ACT 1993

This must be signed by two people, one of whom is listed as the contact on the first page of this application form.

The information you have provided on this form is required so that your application for funding can be processed. Once this application is lodged with the Council it becomes public information and may be made available on the Council's website and/or at the meeting. If there is sensitive information in the application or personal details you wish to be withheld, please advise. These details are collected to inform the public about all funding applications which have been submitted to the Masterton District Council.

We, the undersigned, declare the following in submitting this application:

1. We have the authority to commit our organisation to this application and we have been duly authorised by our organisation.
2. We hereby declare that to the best of our knowledge the information supplied here on behalf of our organisation, for this project, is correct and we authorise Masterton District Council to seek such information as may be required to complete consideration of this application.
3. We undertake that we have obtained the consent of the other contact person to provide these details.
4. We consent to the Masterton District Council collecting the personal contact details provided above, retaining, and using these details for the purpose of administering this grant.
5. We acknowledge your right to have access to this information. This consent is given in accordance with the Privacy Act 2020.
6. We consent to our organisation, a summary of our project and the grant amount sought being made available in the agenda for the public Awards and Grants Committee meeting which will be available on council's website, at the council's office and at the meeting.
7. We acknowledge that any decision made by the Masterton District Council is final.

ORGANISATION CONTACT (from section A. 2. on page 1 of this application):

Name:		Position:	
Signature:		Date:	

ADDITIONAL CONTACT:

Name:		Position:	
Email:		Telephone:	
Signature:		Date:	

If you have any questions about the Community Events Fund, contact Deanna Elwin, Grants Administrator by telephoning (06) 370 6272 or email deannae@mstn.govt.nz