



Outback Communities Authority: Sponsorship Application Form

(To be read in conjunction with the Outback Communities Authority: Sponsorship Policy and Procedures)

Application Date:// Event/Activity Date:/
OR Start date:/ End Date:/
Date funds required by://
Note: Funds required by:
The state of the s
1. APPLICANT DETAILS
Only incorporated associations are eligible for sponsorship, or an individual who has an auspice agreement with an incorporated association
a. Incorporated Associations
Name of organisation:
Location address:
Postal address:
ABN:
Sponsorship Contact Person
First name: Last name:
Position: Phone:
Email:
b. Individual applicant
Name:
Location address:
Postal address:
Phone: Email:
Individual applicants should provide details of the Association with which an auspice arrangement will b made and sponsorship contact person in that Association in a. and b. above.

Objective ID: xxxxxxxx





2. EVENT/ACTIVITY DETAILS Event/Activity Title: Event/Activity Location: Event/Activity brief description: 3. SPONSORSHIP SOUGHT What is the nature of sponsorship being applied for? (tick all that apply) ☐ Money Amount requested: \$..... For what purpose is the funding required? ☐ In-kind support Details of support required: Estimated Value of 'in-kind' support: \$ ☐ Pre-payments1 Details of items to be paid for by the OCA: Estimated Value of pre-paid items: 4. SELECTION CRITERIA □ Vibrancy Does your event / activity contribute to a vibrant and thriving community and wider region? This can include events/ activities that foster cultural diversity, support arts and culture, encourage tourism, or support events and activities. □ Connection Does your event / activity foster connections through the community and wider region? This may involve events/ activities that enhance social inclusion, encourage collaboration among community members, or

☐ Future Opportunities

Does your event / activity create long-term opportunities and contribute to the future growth and development of the community and wider region?

improve accessibility and connectivity.

Objective ID: xxxxxxxx

¹ Examples of items for which pre-payment may be sought include accommodation, printing of advertising materials. Please contact the Outback Communities Authority via email oca@sa.gov.au if you are unsure of what might be considered in this category.





5. RECOGNITION How will the Outback Communities Authority's sponsorship be recognised? 6. PAYMENT DETAILS Nominated Bank Account for Sponsorship Funds that is controlled by the Association: Account Name: BSB: Account number: 7. ACKNOWLEDGEMENT In signing this sponsorship request, the applicant acknowledges that: o the sponsorship funds will be spent on the activity for which it is sought o reporting responsibilities outlined in the policy will be met o the application has the support of the association **OR** as an individual applicant, the agreement of the Association named on page 1 has been sought. Signed: Print Name: Position: (if applicable) Dated:/..../...../ **Internal Use Only**

OCA Approval: Yes / No

Director: Margaret Howard

Approval Date:/..../...../

Notes:

Signed:

Objective ID: xxxxxxxx