

Application Form

Community Development and Events Grant

Category 1 (\$3,000-\$10,000)

File No: FIN/191



Application Dates

Category 1: Community Development and Events Grants

Applications due by:	For projects starting after:
12 November 2025	15 January 2026

If you would like feedback on your draft application, applications must be submitted by **Wednesday, 5 November**. Draft applications submitted after this date will not be guaranteed feedback.

Application Assistance

Before submitting your application you must contact the Shire to discuss your project.

For assistance contact:

Melissa Carmichael
Community Development Officer
Phone: (08) 9780 5627
Email: mcarmichael@amrshire.wa.gov.au

or

Community Development Team
Phone: (08) 9780 5255
Email: communitydevelopment@amrshire.wa.gov.au

For permits to comply with relevant legislation and Shire policies contact:

Catherine Gardiner, Events and Permit Officer
Phone: (08) 9780 5266
Email: cgardiner@amrshire.wa.gov.au

1. Organisational Details

Applicant contact details	
Name of organisation	
Contact person	
Contact number/s	
Contact email	
Address	
Auspice organisation details (if applicable)	
Name of organisation	
Contact person	
Contact number/s	
Contact email	
Address	
Applicant organisation details *if you have an auspice please complete this section based on the auspice organisation	Please tick
Is your organisation an incorporated body?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, please attach proof. If no, please attach auspice support letter.</i>
Are you registered for GST?*	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have <i>Public Liability Insurance</i> ?*	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, please attach a copy of your Certificate of Currency.</i>

CATEGORY 1 (\$3,000-\$10,000)

2. Proposal Details

Project/Event	
Project/Event Name	
Project/Event date/s	
Location/Venue	
Please provide a detailed summary of your project. <i>(max. 250 words)</i>	

Why is your project needed in the Shire of Augusta Margaret River? <i>(max. 100 words)</i>
--

CATEGORY 1 (\$3,000-\$10,000)

Who is your intended community audience for the project? E.g. general community, volunteers of your organisation, young people etc. (max. 100 words)

Priorities: Category 1 - Community Development and Events Grant

Tick the priority(ies) that your project/event will address

You can tick more than one

- | | |
|--------------------------|--|
| <input type="checkbox"/> | Workshops, activations and/or events that encourage celebration, creativity and connection. |
| <input type="checkbox"/> | Projects that build organisational capacity of community groups to enhance their positive impact in the community. |
| <input type="checkbox"/> | Innovative programs that respond to local issues/needs. |

Describe how your proposal will address the priority(ies) you have identified.

CATEGORY 1 (\$3,000-\$10,000)

Project outcomes

Identify three outcomes and the corresponding key results

Please note that you will be asked to provide the outcome and key results in the acquittal form e.g. attendance for events, community benefit/s.

Outcome	Key results

CATEGORY 1 (\$3,000-\$10,000)

Sustainability

Please describe how your proposal considers its environmental impact and benefits for the local economy? e.g. environmentally by minimising negative environmental impacts through its operations and/or services, socially through adopting and demonstrating socially inclusive practices and/or economically by using local businesses and resources.

Accessibility

Please describe what steps you will take to ensure that the program/project will be accessible and inclusive.

CATEGORY 1 (\$3,000-\$10,000)

Shire acknowledgement/s

Successful applicants must acknowledge the Shire in all advertising related to the grant funding. Please provide examples on how you will do this.

3. Funding Request and Budget

Funding request details

How much are you requesting (GST inc.)?

\$

Requested funding period

☐ 1 year ☐ 2 year ☐ 3 year
Please tick

Have you applied for funding from the Shire previously?

☐ Yes ☐ No

If yes, please attach information.

Is the Shire already providing the applicant organisation with financial assistance in this financial year?

☐ Yes ☐ No

If yes, please attach information.

Have you applied for, or are you intending to apply for, other funding sources for this project?

☐ Yes ☐ No

If yes, please provide information in Budget template (see section 6. Budget Details)

What will the funds be used for?(e.g. purchase of equipment, catering, venue hire etc)

Please attach budget information using the *Community Development and Events Grants Budget Template* available here: <https://www.amrshire.wa.gov.au/getmedia/948e65b6-cd70-4759-85bf-da13f86aeb1d/Community-Development-and-Events-Grants-Budget-Template.xlsx>

CATEGORY 1 (\$3,000-\$10,000)

4. Applicant's Financial Details

Applicant banking details

**If you have an auspice organisation, please provide their banking details.*

ABN:

Name of account:

BSB:

Account number:

5. Checklist



Please ensure that you have completed the following before submitting the application.

Please tick off each item when it has been completed or attached. All items must be complete for your application to be eligible.

<input type="checkbox"/>	Discussed your application with a Shire Community Development Officer.
<input type="checkbox"/>	Read and understood the Community Development and Events Grants Guidelines.
<input type="checkbox"/>	Completed all questions in the application form.
<input type="checkbox"/>	Attached a completed Community Development and Events Grants Budget Template (including anticipated Shire fees and charges).
<input type="checkbox"/>	Attached quotes for all goods and services allocated under Shire funding.
<input type="checkbox"/>	Attached Certificate of Incorporation or letter from auspice organisation.
<input type="checkbox"/>	Attached Public Liability Insurance (Certificate of Currency).
<input type="checkbox"/>	Attached additional support documents e.g. support letter/s (optional)

CATEGORY 1 (\$3,000-\$10,000)

6. Declaration

Authorisation details (auspice to also sign if applicable)		
Name of authorising applicant (s):		
Position of authorising applicant(s):		
I hereby certify that to the best of my knowledge the statements made within this application are true and correct. I understand that if successful the award of funding is subject to the terms and conditions of a grant agreement with the Shire of Augusta Margaret River.		
Signature(s)		
Date		

7. Application Submission Options

Completed applications must be submitted to the Shire by:

Email:	communitydevelopment@amrshire.wa.gov.au	
Post	Chief Executive Officer Shire of Augusta Margaret River PO Box 61 Margaret River WA 6285	
Hand delivery:	Shire Offices - Reception 41 Wallcliffe Road, Margaret River 9.00am – 4.00pm	OR Shire Offices - Reception 66 Allnutt Terrace, Augusta 9.00am - noon, 1.00pm - 4.00pm

CATEGORY 1 (\$3,000-\$10,000)