Donation Application Form – Civic Events 2025-26

FIN/226

Applicant / Organisation Details			
Contact person			
Name of organisation			
Contact numbers	(B/H)		(Mob)
Email			
Postal address			
ABN *If applicable*			
Is your organisation an incorporated body? *If yes, please attach proof*		**Yes**	**No**
Are you registered for GST?		**Yes**	**No**
Do you have 'Public Liability Insurance?' *If yes, please attach a copy of 'Certificate of Currency'*		**Yes**	**No**

Donation Summary

Civic Event Details	
Name of event	
Event location and venue	
Event date/s	
Amount being requested (incl GST)	

Shire of Augusta Margaret River 41 Wallcliffe Road, Margaret River 6285 | T (08) 9780 5255 | F (08) 9757 2512 | amrshire.wa.gov.au

What will the funds be used for? *Please provide a brief description here and complete the Financial Summary section located below*	
Have you previously applied for funding from the Shire?	
Is the Shire already providing the applicant organisation with financial assistance in this financial year?	
If your event is taking place at the Margaret River HEART facility, are you intending to apply for a HEART Grant?	

Financial Summary

Income		
Funding Source	**$ (incl. GST)**	**Confirmed Y/N**
Amount requested from the Shire of Augusta Margaret River		N/A
Amount contributed by other grants/sponsorships/fundraising		
Amount contributed by your organisation (cash)		
In-kind contributions (e.g. materials, volunteer time @ $41.72 hour):		
		N/A
***TOTAL**		
Expenditure *(please specifically outline how Shire funds will be used)*		
Costs	**$ (incl. GST)**	**Confirmed Y/N**
Shire funding (please itemise below e.g. venue, catering, materials, marketing etc.)	N/A	N/A
		N/A
		N/A
		N/A
		N/A
***TOTAL**		

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Applicant Banking Details	
ABN (if applicable)	
Name of account	
BSB	
Account number	

Authorisation

Authorisation Details	
Name of authorising officer	
Position of authorising officer	
I confirm that all the information contained within application is true and correct and authorise this application for a Donation to be considered for approval. I authorise being contacted by the Shire's Marketing and Events Officer and consent for the Shire to use images of me and quotes provided by me for promotional purposes, including but not limited to news reports, articles, media releases and the Shire of Augusta Margaret River's website.	
Date	

Application Assistance

Please read the Donation guidelines carefully before applying. If you require any further information or assistance with your application form, please contact:

Hannah Waters, Executive Assistant
Email: hwaters@amrshire.wa.gov.au
Phone: 9780 5638

Submitting Your Application

Applications must be submitted by completing an application form.

Application Forms are available in hard copy should it be required.

Completed applications must be submitted to the Shire by email or post

Email:	amrshire@amrshire.wa.gov.au
Post:	Chief Executive Officer Shire of Augusta Margaret River PO Box 61 Margaret River WA 6285

Shire Office Use Only	
Authorised under the Instrument of Delegation: "Power to make payments from the municipal or trust funds"	
Approved: Yes No	**If no, reason application was declined:**
Donation total	**$**
Signature and date of authorising officer	