

Please complete the application form for review and assessment by the City of Holdfast Bay sponsorship assessment group.

1. EVENT INFORMATION	
Date of Application:	
Event Name:	
Organisation (Legal name):	
ABN:	
Phone:	Mobile:
Email:	
Type of Event:	Event Date:
Please provide details of any previous funding or relationship with the City of Holdfast Bay:	

Please provide a description of the event, including background, program of activities, objectives, target market and the key outcomes/results you want to achieve (please attach additional document if not enough room):

3. SPONSORSHIP REQUEST

Cash: ☐ How much are you requesting?

Please advise what the cash sponsorship will contribute to:

In-kind:	<input type="checkbox"/> Waived/Reduced hire fees	<input type="checkbox"/> Waste Management	<input type="checkbox"/> Irrigation Line Marking
	<input type="checkbox"/> Traffic Management Plan	<input type="checkbox"/> Road Closure Management	<input type="checkbox"/> Signage/Banners
	<input type="checkbox"/> Bollards/Bunting	<input type="checkbox"/> Crowd Control Barriers	<input type="checkbox"/> Cleaning
	<input type="checkbox"/> Other		

4. BUDGET

Please provide a detailed budget including income, expenditure, in-kind value and third party contributions.

Income	\$	Expenditure	\$
Government funding		Wages	
Council funding (cash)		Equipment hire fees	
Council funding (approx in-kind)*		Marketing/promotion	
Applicant contribution (cash, volunteer hours etc)		Insurance	
Other sponsorship/grants		Council hire fees	
Other income (registration fees, vendor fees, ticket sales etc)		Security	
		Entertainment	
		Miscellaneous	
TOTAL INCOME		TOTAL EXPENDITURE	

* Please note that in-kind sponsorship (income) also requires a corresponding expenditure item.

If your sponsorship application is unsuccessful, will the event still be staged? Yes ☐ No ☐

Please list all 'other' sponsors and their status (e.g. confirmed or pending):

5. EVENT PROMOTION

Please detail the event promotional/marketing campaign:

6. EVENT OUTCOMES

Please define your expected outcomes for the event (these can be used to compare to actual outcomes in the Post Event Acquittal Report). A Council sponsorship report is expected to be completed one (1) month after the completion of your event:

7. BENEFITS TO COUNCIL

Please refer to the Sponsorship Benefit Matrix in the Event Sponsorship Guidelines 2016-2017 for the minimum requirements for your level of sponsorship request.

Please list details of benefits (refer to Sponsorship Benefits Matrix) and attach examples.

8. CHECKLIST

Completed all sections of the application	<input type="checkbox"/>
Attach a fully costed event budget	<input type="checkbox"/>
Attach any further information you think is relevant	<input type="checkbox"/>
Keep a copy of your application for future reference	<input type="checkbox"/>

9. APPLICANT SIGN OFF

- ☐ I have read and understand the City of Holdfast Bay's Event Sponsorship Guidelines 2016-2017 and certify to the best of my knowledge that the statements made in this application are true.
- ☐ I understand that should this application be approved that I would be required to accept the conditions of the sponsorship agreement in accordance with Council's accountability and reporting requirements.

Signed for and on behalf of the Applicant/Event Organiser:

Name:	Date:
Position:	Signature:

Please forward completed application and/or queries to:

City of Holdfast Bay – Event Management

PO Box 19

BRIGHTON SA 5048

Phone: 08 8229 9999

Email: events@holdfast.sa.gov.au

OFFICE USE ONLY

Event Authorisation:	Approved <input type="checkbox"/>	Not approved <input type="checkbox"/>
Name:		
Account Manager:		
Cash Amount Approved:		
In-kind Amount Approved:		
TOTAL SPONSORSHIP PROVIDED:		