



SPONSORSHIP GUIDELINES

Parkside Group makes positive financial contributions to regional communities in which we live and work. Each calendar year, Parkside offers funding for community groups and not-for-profit initiatives, projects and programs. This is a capped program and once all monies have been distributed for the year, sponsorship programs are considered closed.

Eligibility

To be eligible for sponsorship your business, group or organisation must be registered in one of these local government areas.

- Townsville City Council
- Burdekin Shire Council
- Western Downs Region
- Shire of Banana
- South Burnett Region
- Shire of Bridgetown - Greenbushes
- Shire of Manjimup
- Shire of Nannup
- Shire of East Gippsland

Applicants must be a registered not-for-profit group or organisation based in Australia and possess an ABN that aligns with the registered name of the organisation.

Applicants must also align to at least one of Parkside Group's core community focus areas.

- Sustainable communities
- Health and Well-being
- Education / Skills development
- Environmental stewardship
- Social welfare

What is not eligible for funding?

- Organisations that operate for profit.
- Projects or initiatives that discriminate on the basis of race, gender or lifestyle.
- Religious or political activities including advocacy or lobbying.
- Individuals participating in sporting events.
- Travel costs for events or sporting trips.
- Projects or programs that would ordinarily be funded by government.
- Organisations that have not fulfilled previous sponsorship agreements.
- Activities that promote:
 - Gambling
 - Beauty contests / pageants
 - Drinking, smoking or any substance abuse.



PARKSIDE
GROUP

SPONSORSHIP APPLICATION

Your Name

Mobile

Email

Please confirm you have read the guidelines (tick one) Yes No

Registered name of Organisation

Physical Address

Website

ABN

Registered for GST? Yes No

DGR status Yes No

More about you

What local government area is your organisation's address in?

- | | |
|--|--|
| <input type="checkbox"/> Townsville City Council | <input type="checkbox"/> Burdekin Shire Council |
| <input type="checkbox"/> Western Downs Region | <input type="checkbox"/> Shire of Banana |
| <input type="checkbox"/> South Burnett Region | <input type="checkbox"/> Shire of Bridgetown - Greenbushes |
| <input type="checkbox"/> Shire of Manjimup | <input type="checkbox"/> Shire of Nannup |
| <input type="checkbox"/> Shire of East Gippsland | |

What categories apply to your application?

- | | |
|---|--|
| <input type="checkbox"/> Sustainable communities | <input type="checkbox"/> Health and Well-being |
| <input type="checkbox"/> Education / Skills development | <input type="checkbox"/> Environmental stewardship |
| <input type="checkbox"/> Social welfare | <input type="checkbox"/> Other, please specify |

Type of organisation

- | | |
|---|--|
| <input type="checkbox"/> Charity / not-for-profit | <input type="checkbox"/> Association |
| <input type="checkbox"/> Community group | <input type="checkbox"/> Other, please specify |

Summary of the goals and aims of your organisation

Name of project or initiative in which grant will be directed

Details: how many people will benefit, why, and how, and how does this contribute to your community overall

What sponsorship amount are you seeking?

Assumed benefits for Parkside, and how our contribution will be acknowledged.

Declaration

I certify that all the information provided in this application is current and correct and I give Parkside Group permission to contact any relevant person or organisation in processing this application.

I acknowledge and agree that if I am successful in my application I will:

- Accept and use the sponsorship grant as intended.
- Allow information about the initiative to be used by Parkside Group for external communications and promotions purposes.
- Will use any Parkside Group display materials / logos supplied as agreed.

Name of person completing form**Position****Date****Bank Details**

Account name

BSB

Account number

Parkside Group Authorisation - office use only**Amount Requested?****Approved** **Amount****Declined** **Signature****Date****Has the person requesting the donation been notified?** Yes No **Date sent to Head office for payment****Items Donated****Retail Value \$****Invoice No****Date**