



Organisation/Group name:			
Contact Person's name:			
Contact Person's position:			
Postal Address:			
Phone:		Mobile:	
Email:			
Is the organisation incorporated?	Yes	No	
If no, name of sponsoring organisation:			

Purpose of Assistance (eg sponsorship of event; general assistance; group excursion etc.):

Assistance Request (use of facilities, use of plant etc)

List items and \$ amounts (eg hall use, plant use etc.) Please refer to the fees and charges on Council's website	Amount
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL VALUE OF IN-KIND REQUEST:	\$



Organisation's Contribution:

How will the community benefit from Council Support:

Note any special circumstance around the event:

How will the organisation acknowledge Blackall-Tambo Regional Council (if successful):

All sections of this form have been completed

I certify that to the best of my knowledge, information detailed in this application is true and correct.

Sign: _____ **Date:** _____

Privacy Statement:

Council will use any personal information provided by you for the intended purpose only and for remaining in contact with you. Council is authorised to collect this information with the Local Government Act 2009 and other Local Government Acts. Your personal information is only accessed by persons authorised to do so. Council may provide information about you to any relevant Queensland State Department. Your personal information is dealt with in accordance with Council's privacy policy

Office Use Only

Magiq Doc #	Entered into register <input type="checkbox"/>	Date:
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