



CLUB HELENSVALE

078 Community Benefit Fund

Mission

To provide a level of support to local sporting groups, charities and other organisations who, without this support, would find it difficult to achieve their organisational goals.

Purpose

The Club Helensvale Community Benefit Fund has been established to provide support to the local community.

The Club Helensvale Community Fund will provide sponsorship and donations for the community through charitable organisations, local sports clubs and educational groups.

We welcome requests for assistance from eligible organisations that provide local services in the areas of childhood/youth, people with disabilities, environmental care, social/community welfare, sports facilities.

Eligibility

Applicants must demonstrate they fall within the following categories:

- Community based; or
- Sporting Group: or
- Club Helensvale Bowler: and
- Provides services to the Helensvale/Pacific Pines/Gaven/Coomera/Hope Island/Ormeau area.

Ineligible Organisations

- Corporate Companies

Ineligible Projects

- General fundraising appeals
- Overseas travel
- Projects suited to corporate sponsorship
- Projects suited to government funding
- Funding for individuals

Assessment

Applicants are required to submit an application form and written submission. The Funding Guidelines will assist you to determine your organisation's eligibility for Club Helensvale's funding.

The written submission should include an outline of the proposal stating the specific details of the funding required and how it will be used.

The written submission must not exceed two (2) A4 pages.



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Funding

Funding is generally committed up to a maximum of \$10,000 per application except where it can be proven that meaningful impact will result from the community funding in which case the funds allocated may be greater.

Funding Guidelines

- Application is eligible to receive funding
- Application meets a significant and demonstrable need in the local community
- Application is based on sound research and has a strong likelihood of meeting its objectives
- Incomplete applications will not be assessed
- If time constraints apply, this should be noted in application
- Keep a copy of your application and written submission for your own records and in case of request.

Preparing the Written Submission

Provide details about your application in a maximum of two (2) A4 pages or less including:

- A brief history of your organisation, including its objectives and activities;
- The number of volunteers and/or paid employees in your organisation;
- What benefit will be gained from the funding, including who it will aid and how the local community will benefit from the project;
- Provide information that will outline and support your organisation's achievements to date; and
- Provide details of any other financial support your organisation receives.

How To Apply

An application may only be made in writing on the application form, which is available online at www.clubhelensvale.com.au or is available for collection from Reception at Club Helensvale, 20-28 Discovery Drive, Helensvale.

Evaluation

Each application for funding will be considered on its merit against all other applications.

Successful Applicants

- Successful applicants will be notified within thirty (30) days of the next Board of Directors Meeting which is held at the end of each month
- Successful applicants will be published in internal Club Helensvale publications, external publications, media and listed on the Club Helensvale website for public information.

Other Conditions

- Representatives of Club Helensvale may visit any applicant at times and on conditions agreed between the parties
- Where funding is declined the Board does not advise the reasons for the decision
- Any unsuccessful applicant may reapply under the same conditions of the application



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APPLICATION FORM

Applicants should read the guidelines carefully before completing this Application Form.

Answer each question fully and submit requested documents with the Application Form. This original Application Form must be fully completed, signed and submitted with your Written Submission and any other required documentation to:

General Manager
Club Helensvale Community Benefit Fund
PO Box 92
HELENSVALE QLD 4212

Incomplete or faxed copies will not be considered for funding.

ORGANISATIONAL DETAILS (applicant)

Name of Organisation: _____

Postal Address: _____

_____ Postcode: _____

Telephone: _____

Email: _____

ABN: _____

GST Registered: YES NO

Income Tax exempt: YES NO

CONTACT PERSON (for enquiries during business hours regarding this application)

Full Name: _____

Address: _____

_____ Postcode: _____

Telephone – Business Hours: _____

Email: _____

ACCOUNTABLE OFFICER

Full Name: _____

Position in Organisation: _____

Postal Address: _____

_____ Postcode: _____

Telephone – Business Hours: _____

Email: _____



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PURPOSE FOR FUNDS Maximum two (2) A4 pages of your proposal as a separate attachment

BUDGET

Please list items in priority order, each item should be listed and costed individually.
A copy of the selected quotation for each item listed must be attached.

Budget Item	Total Cost ex GST (\$)
Total Funding Required	
Total Funding Sought	

I certify that the information provided in this application is, to the best of my knowledge, true and complete, and that it accurately reflects the financial position of the applicant organisation. I authorise the release of the information contained herein to the appropriate Committee being the Board of Directors and I authorise the Board of Directors to make further enquiries where necessary. In addition, I agree to include details of this project to be utilised in internal and external marketing or publications eg. social media and website.

Date: _____ Applicant's Signature: _____

FINANCIAL AND LEGAL DOCUMENTS

Please attach documents in this order:

- Application Form – original signature
- Written Submission – Max two (2) A4 pages
- Certificate of Incorporation
- List of Current Management Committee, Board or Similar
- Latest Audited Financial Statement
- Quotations for Project Costs
- Copy of plans/drawings (if applicable)
- Verification of charitable status (if applicable)



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OFFICE USE ONLY

Name of Recipient _____

Previous Recipient YES NO

Previous Funding Amount _____

Board Meeting Date _____ Approved YES NO

Approved Funding Amount _____

Notification to Recipient ACTIONED Date _____

Paid to Recipient Date _____ Cheque EFT CASH

Promotional Photo Date Scheduled _____ Completed