



Outback Communities Authority: Sponsorship Application Form

(To be read in conjunction with the Outback Communities Authority: Sponsorship Policy and Procedures)

Applicatio	n Date:/ Event/Activity Date:/
OR Start	date:/ End Date:/
	s required by://
1. AF	PPLICANT DETAILS
	orated associations are eligible for sponsorship, or an individual who has an auspice agreement with an ed association
a.	Incorporated Associations
Name of or	ganisation:
Location ad	dress:
Postal addr	ess:
ABN:	
Sponsorsh	nip Contact Person
First name:	Last name:
Position:	Phone:
Email:	
b.	Individual applicant
Name:	
Location ad	dress:
Postal addr	ess:
Phone:	Email:
	applicants should provide details of the Association with which an auspice arrangement will be sponsorship contact person in that Association in a. and b. above.

Objective ID: A6138389





2. EVENT/ACTIVITY DE	TAILS
Event/Activity Title:	
Event/Activity Location:	
Event/Activity brief descript	ion:
3. SPONSORSHIP SOUG	ЭНТ
What is the nature of sponso	orship being applied for? (tick all that apply)
☐ Money	Amount requested: \$
	For what purpose is the funding required?
☐ In-kind support	Details of support required:
	Estimated Value of 'in-kind' support: \$
☐ Pre-payments	Details of items to be paid for by the OCA:
	Estimated Value of pre-paid items:
4. SELECTION CRITERIA	
☐ Vibrancy	
can include events	activity contribute to a vibrant and thriving community and wider region? This 5/ activities that foster cultural diversity, support arts and culture, encourage t events and activities.
\square Connection	
events/ activities th	activity foster connections through the community and wider region? This may involve hat enhance social inclusion, encourage collaboration among community members, or lity and connectivity.
☐ Future Opportunities	
	activity create long-term opportunities and contribute to the future growth and e community and wider region?

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¹ Examples of items for which pre-payment may be sought include accommodation, printing of advertising materials. Please contact the Outback Communities Authority via email oca@sa.gov.au if you are unsure of what might be considered in this category.





5. RECOGNITION

How will the Outback Communities Authority's sponsorship be recognised?

6.	PAYMENT DETAILS	
Nomin	ated Bank Account for Sponsorship Funds that is controlled by the Association:	
Accour	nt Name:	
BSB:	Account number:	
7.	ACKNOWLEDGEMENT	
In signi	ng this sponsorship request, the applicant acknowledges that:	
0 0 0	the sponsorship funds will be spent on the activity for which it is sought reporting responsibilities outlined in the policy will be met the application has the support of the association OR as an individual applicant, the agreement of the Association named on page 1 has been sought.	
Signed	:	
Print N	lame:	
Position: (if applicable)		
Dated:	///	
Interna	al Use Only	
OCA A	pproval: Yes / No	
Directo	or: Margaret Howard Signed:	
Approv	val Date://	

Notes:

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