This form is to be used by non-profit community organisations to seek funding for events and services that benefit the needs and priorities of the Winton community (including schools, welfare, sporting and cultural groups).

Contact details	
Organisation Name	
Organisation Addre	ess
Contact Name	
Contact Email	
Type of organisati	ion
Organisation Type	Is the group a non-profit organisation? (Must be a non-profit organisation to apply) Yes No
ABN or Incorporation	on No.
Event details	
Event name	
Date of event	(must allow 8 weeks prior to event)
Address of event	
Description of event	nt .
Level of support re	raquastad

Phone 07 4657 2666 **Address** PO Box 288, Winton, QLD, 4735

WSC-COM-FRM-001 2023-08

	COMMUNITY GRA	Winton Shire Council						
	donation hbursement	Plant/equipment	☐ In-ki	ind ass	istance			
Amount of s	\$							
Previous History								
Has your organisation received any grants, financial assistance or inkind support from Winton Shire Council in the previous 12 months?								
If Yes, please provide details								
Promotional material								
Please list any promotional material that will be produced that will include the Winton Shire Council logo (Council requires sighting of final artwork prior to printing)								
Confirmation	on of application							
I/we certify that all details supplied in this application and in any attached documents are true and correct to the best of my/our knowledge, and that the application has been submitted with the full knowledge and agreement of the applicant group/organisation. I/we also confirm that the organisation applying does not have any outstanding debts with Winton Shire Council.								
I/we understand that all promotional donation is subject to the discretion of Winton Shire Council. I/we will accept the decision made by Winton Shire Council and abide by the guidelines of this policy and that I/we can only receive one donation from Council per event per financial year.								
Name								
Signature				Date				



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