

Individual Athlete Grant Application Form 2023/24

Form Preview

2023/24 Individual Athlete Grants

Welcome to the AlburyCity Individual Athlete Grant program.

Applications can be made at any time but must be received at least 4 weeks prior to the planned event.

Before completing your application, please make sure you familiarise yourself with the grant selection criteria [2023/24 Individual Athlete Grants - Albury City Council \(smartygrants.com.au\)](https://www.alburycity.nsw.gov.au/smartgrants) and AlburyCity's Financial Assistance Policy [Financial Assistance Policy | AlburyCity \(nsw.gov.au\)](https://www.alburycity.nsw.gov.au/financial-assistance)

For queries about the guidelines, deadlines, or questions in the form, please contact us on (02) 6023 8111 during business hours or email info@alburycity.nsw.gov.au and quote your application number.

Personal Details

* indicates a required field

Athlete's Name *

Athlete's Address *

Address

Suburb State Postcode

Please attach evidence of your residency eg. drivers licence *

Attach a file:

Contact Name *

Title

First Name

Last Name

Primary Contact Number *

Secondary Contact Number

Email Address *

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**Parent / Guardian Name
(if under 18)**

General Details

**Please select any
category that applies to
you ***

- Disability Male
 Aboriginal or Torres Strait
Islander Female
 Speak English as a
Second Language

**Please select your
relevant age bracket ***

- 18 and Under
 19 to 29
 30 to 39
 40 to 49
 50 to 59
 60+

**Have you received
assistance under this
program in the last two
years? ***

- Yes
 No

Event Details

* indicates a required field

Name of Event *

Sport *

**Who are you
representing? ***

**What level of
representation does this
fit ***

- State Level - For nation-wide competitions where the
applicant is representing State (E.g. NSW or Victoria)
 National Level - For international competitions where
the applicant is representing Australia

Location of Event *

**Please identify a
starting date for this
event ***

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Please give full details of the event *

Please attach proof of your selection from a governing body. E.g. Letter of Selection *

Attach a file:

Please identify the date you were notified of your selection *

Must be a date.

Please detail the pathway to how you were selected in this team *

Please detail the costs involved in participating in this activity, how it will be funded and any other funding assistance received *

Please detail any professional involvement in the sport or any prize money involved in this event

Please detail your history of participating in this sport and list your current local team *

Please detail any other sports you participate in

Applicant Declaration

* indicates a required field

*

I certify that to the best of my knowledge the statements made in this application are true.

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- I understand that if the Council approves a grant, I will be required to accept the conditions of grant in accordance with Council requirements.
 - I consent to the information contained within this application being disclosed to or by the Council for the purpose of assessing, administering and monitoring my current and any future Council grant applications.
 - I understand that if the Council approves a grant, I will be bound by the contents of my application to carry out my project as I have described and my application will form part of my contractual agreement with the Council.
 - I have no outstanding grant acquittals or outstanding debts owing to Council.
 - I am submitting this application at least 4 weeks prior to the planned event
- At least 6 choices must be selected.

Your Name *

Title

First Name

Last Name

Relationship to Athlete

If you are completing the application on behalf of the athlete

Date of Declaration *

You are now at the end of the Application. To finalise and submit your grant application, please answer the following feedback questions so we can improve our application process for the future.

Once you have answered the questions, press **REVIEW** (below right), download a copy for your records and then **SUBMIT**.

AlburyCity Feedback Questionnaire

Please select from the list, how you became aware of this program: *

Border Mail Advertisement

Social Media

Any other media (e.g TV)

Discussions with Council Staff

Word of Mouth

AlburyCity Feedback Questionnaire

How much time did your application take to complete? *

Less than 1 hour

1 hours to 2 hours

2 hours or more

Did you experience any problems or issues in completing the application? *

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Will you apply for a future AlburyCity online grant? *

Yes

No

Maybe