**Attachment A - Application form for sponsorship and membership**

Applicants should complete the application form to enable HCCDC to assess the sponsorship proposal.

| **Application for Sponsorship & membership** |
| --- |
| **Applicant (Legal entity and ABN):** |  |  |
| **Contact name:** |  |  |
| **Contact phone number:** |  |  |
| **Contact email:** |  |  |
| **Website:** |  |  |
| **Address:** |  |  |
| **Suburb:** |  |  |
| **Name of Event/Activity/membership:** |  |  |
| **Date of Event/s/Activation/s/Membership:** |  |  |
| **Venue/Location of Event:** |  |  |
| **Is this a one-off activity or annual event?** |  |  |
| **Type: (Cash or Value in Kind)** |  |  |
| **History of Sponsorship or Membership with HCCDC or Government:** | Event | Year |
|  |  |
|  |  |
|  |  |
|  |  |
| **Sponsorship/Membership Hierarchy/Level**For example, Major Partner, Official Supplier, Supporting Sponsor Gold, Silver or Bronze Member: |  |
| **Other sponsors/partners/members:** | Sponsor/Partner | Value/Level |
| **Please include any other government department providing sponsorship:** | 1.2.3.4.5. |
| **What is the maximum number of sponsors who could be involved and at what level/hierarchy?** |  |
| **Background**:In 200 words or less please provide us with a background and credentials of your organisation including its values, purpose history and length of operation? |  |
| How will the **Sponsorship funds** provided by HCCDC predominately be used? |  |
| What are the proposed **Sponsorship or membership outcomes**? | 1.2.3.4.5. |
| **Target Audience**Please include any supporting research and demographics. | 1. Primary:2. Secondary:3. Tertiary:Supporting research and demographics: |
| **Reach of the** **Sponsorship** How many people see, attend or are involved? |  |
| **Media Partners and Exposure:**What, if any, media partners are confirmed and what is the expected media exposure? |  |
| **Benefits:** Outline the Sponsorship or Membership benefits to HCCDC |  |
| **Alignment**: In 300 words or less, please describe how your activity, event or organisation meets the eligibility criteria (see section 2 in [**Sponsorship and Membership Policy**](https://www.hccdc.nsw.gov.au/sites/default/files/2018-12/HCCDC%20Sponsorship%20and%20Membership%20Policy%20%26%20Application.pdf)): |  |
| **Marketing, Communications, Event, Membership Plans:** |  Yes No |
| **Resourcing**: How will the organisation manage the sponsorship and what resources will manage the project? | Title and responsibility: |
| **Sponsorship or Membership Evaluation and Reporting**:Detail how the success of the sponsorship will be measured following key execution/events: | Date reporting will be supplied: |