**Attachment A – Sponsorship Application Form**

Applicants must complete the below form to be considered for Sponsorship.

| **Application for Sponsorship** | | | |
| --- | --- | --- | --- |
| **Organisation information** | | | |
| **Application date** |  |  | |
| **Applicant / organisation** Legal entity name and ABN |  |  | |
| **Organisation type** Charity, not for profit, private entity etc |  |  | |
| **Website** |  | | |
| **Contact details** | | | |
| **Contact name** |  | | |
| **Title and responsibility** |  | | |
| **Phone number** |  | | |
| **Email** |  | | |
| **Postal Address** |  | | |
| **Sponsorship activity details** | | | |
| **Name of activity or event** |  | | |
| **Activity date** |  | | |
| **Venue or location** |  | | |
| **Summary of the activity** |  | | |
| **Is this a one-off or annual activity?** |  | | |
| **Who is the target audience?** |  | | |
| **How many people see, attend or are involved?** |  | | |
| **Requested sponsorship** | | | |
| **Type of sponsorship** Cash or value-in-kind |  | | |
| **Sponsorship value** $ excluding GST | **$** | | |
| **Sponsorship hierarchy/level**  Eg: Major Partner, Official Supplier, Supporting Sponsor Gold, Silver or Bronze Member |  | | |
| **How will the funds provided by HCCDC be used?** |  | | |
| **Outline the benefits of sponsorship to HCCDC** |  | | |
| **How will the success of the sponsorship be measured?** |  | | |
| **Alignment with HCCDC’s strategic objectives** | | | |
| **Describe which of the following objectives your activity aligns with, and how?** | | | |
| Deliver strategic outcomes to grow economic capacity and enhance communities |  | | |
| Drive industry diversification to grow more jobs to attract and retain talent to the regions |  | | |
| Create engaging, sustainable and attractive public spaces, connected to better transport options |  | | |
| Unlock opportunities and realise the full potential of government land and assets |  | | |
| Respect existing character, culture and heritage |  | | |
| Work in collaboration and partnership with community and stakeholders |  | | |
| **Additional information** | | | |
| **History of Sponsorship with HCCDC or Government** | **Event** | | **Year** |
|  | |  |
| **List any other partners or Government departments providing sponsorship** | **Sponsor/Partner** | | **Value/Level** |
|  | |  |
| **Evaluation Report**  Post-event report must be submitted within 2 weeks of the completed sponsorship activity | Due Date: | | |