#### Eligibility

\* indicates a required field

#### Important Information

Thank you for showing interest in the City of Melville's Youth Sport Grant. Before applying please:

- Read and understand the Youth Sport Grant Eligibility Criteria and Guidelines.
- Preview the Application Form, so you can gather all required information.

#### **Eligibility Questions**

This page of the form is designed to help you, and us, understand if you are eligible for Youth Sport Grant. It's crucial that you complete these questions before any others to ensure you do not waste your time applying for unsuitable funding.

Will the applicant be aged 18 years event? *	s or younger (inclusive)	at the time of the
○ Yes	○ No	
If no, you are not eligible to apply.		
Does the applicant currently reside	e in the City of Melville?	*
○ Yes	○ No	
If no, you are not eligible to apply.		
Has the applicant been selected by represent Western Australia or Aus		Sporting body to
Yes	○ No	
If no, you are not eligible.		
Has the applicant been successful	in obtaining the City of	Melville's Youth Sport
Grant in the last two years? *		
O Yes	○ No	
If yes, you are not eligible.		

If you are not deemed eligible please do not continue with this Application Form. The City cannot approve funding if you do not meet the eligibility criteria.

#### Applicant and Contact Details

\* indicates a required field

**Applicant Details** 

For the person eligible for the Youth Sport Grant.

Name *	Title	First Name	Last Name	
Date of Birth *				
	Must be a c Applicant t	date. o be 18 years or you	unger (inclusive) at	ime of event.
Residential Address *	Residential Address * Address			
	Address Lin required.	ne 1, Suburb/Town, S	State/Province, and	Postcode are
Contact Details				
Contact Person *	Title	First Name	Last Name	
Phone Number *				
	Must be an	Australian phone nu	umber.	
Contact Email Address *				
	Must be an	email address.		
Competition and Selecti	on Deta	ailc		
* indicates a required field	on Dete	)		
Competition Details				
Competition Details				
Selected sport *				
E.g. Netball, Basketball, Fencing, Bad	iminton etc.			
Name of competition *				
The full name of the competition you	are attendi	ng.		
Age group *				
The age group you will be representing	na			

Competition start date *
Applications must be submitted before this date to be considered.
Competition end date *
Location the competition is being held *
Selection Process
How were you selected for the representation? *
For example; knockout competition, state trials, accumulated competition points etc.
Name of the sporting body/association who has invited you? *
e.g. Football West, Netball WA, School Sports WA etc.
Please provide proof of selection: * Attach a file:
More than one document can be uploaded to support your application.
Proof of selection must include:
<ul> <li>Applicant's full name,</li> <li>Applicant's residential address,</li> <li>Confirmation of selection,</li> </ul>
<ul> <li>Event details (name of event, age bracket, location and event dates), and</li> <li>Endorsement by the nominated State or National Sporting Association</li> </ul>

I understand, if insufficient proof of selection is provided my submission will be declined. I may resubmit an application with further proof if I meet all other eligibility criteria. \*

○ Yes

#### **Bank Details**

\* indicates a required field

#### **Bank Details**

Please provide applicant bank details below.

- If your application is successful, payment will be made by electronic funds transfer (EFT).
- Payments can only be made to valid Australian bank accounts. No international bank account numbers are allowed.
- Payments can only be made to personal bank accounts. Do not provide details for your club/team, organisation or school.

Name of Bank *		
Bank Branch *		
Account Details *	Account Name	
	BSB Number	Account Number
	Must be a valid Au	ustralian bank account format.

#### Review and Submit

\* indicates a required field

#### Declaration

- I declare that I have disclosed all relevant information pertaining to this application and they are true and correct to the best of my knowledge.
- I will notify the City of Melville of any changes to the information supplied or to circumstances arising that are relevant to this application.
- I understand that this is an application only and may not necessarily result in funding approval.
- I have fully read and understand this Application Form, Eligibility Criteria and Guidelines as provided by the City of Melville, pertaining to this application for a Youth Sport Grant.
- I understand that the decision made by the City of Melville is final and not subject to an appeals process.

#### If funding is approved,

- I understand this grant is for travel costs, entry fees or any other event costs and not for personal gain ie. personal development, training, coaching, administration or everyday living expenses.
- I understand the City of Melville cannot guarantee that successful applicants will receive their grant prior to the commencement date of their event, therefore I should not rely on this donation.

I/We agree with the above declaration *	○ Yes	○ No	
Applicant name (or Contact Person) *	First Name	Last Name	

Date *		
	Must be a date.	

#### **Privacy Notice**

In compliance with the *Information Privacy Act 2009* (the Act) personal information on this form may be stored in the City of Melville's records database and may also be used for statistical research, information provision and evaluation of services. Your personal information may be provided to the financial institution which handles City of Melville's financial transactions and may be disclosed to other agencies and third parties for purposes related to this application and/or monitoring compliance with the Act. Except in these circumstances, personal information will only be disclosed to third parties with your consent unless otherwise required or authorised by law.