

APPLICATION FORM

INDIVIDUAL REPRESENTATION SUPPORT **\$250 for an Individual**

CHECKLIST

 I have understood the Community Grants, Donations and Sponsorships Policy and am eligible to apply

 I have attached proof of selection for representation

 I have not received funding from the City of Palmerston this financial year.

INDIVIDUAL DETAILS

Individual's Name:

Contact Name:

Position of Contact:

Telephone:

Email:

Residential Address

EVENT DETAILS

Activity Name:

Location of Activity:

Activity Date:

Amount Requested:

Will funding or support be received from other sources? If so, where.

How will funding be used (flights/accommodation/registration):

Benefit of Attending:

AGREEMENT

I agree to publicly acknowledge City of Palmerston's contribution via the following:							
	🛛 Social Media Post	□ Website	□ Newsletter	□ Prom	otional Material	□ Other	
I agree to supply CoP with an individual photo of the representative, with permission to reproduce.							
Signed	d:		Date:	/	/		
PLEASE RETURN COMPLETED FORM WITH ATTACHED APPLICATION TO THE CITY OF PALMERSTON							
PLEAS	E RETURN COMPLETED F	ORM WITH ATTAC	HED APPLICATION 1	TO THE CI	TY OF PALMERSTON		
PLEAS	E RETURN COMPLETED F			TO THE CI	IY OF PALMERSTON		

The City of Palmerston complies with the information Privacy Principles contained in the *Information Act* (NT). These principles protect the privacy of personal information collected and held by Council. Council's privacy statement is available from the City of Palmerston, Civic Plaza, 1 Chung Wah Terrace, or via our website on <u>www.palmerston.nt.gov.au</u>.