

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

## Active & Healthy Program - Request for Proposal

\* indicates a required field

### Active & Healthy Program Information

Are you passionate about helping the community? Do you want to deliver activities that make a difference to the health and wellbeing of people living in Logan?

Logan City Council's [Active & Healthy program](#) provides Logan residents with a range of local and affordable activities. The program's focus is on delivering low-cost health and wellbeing activities in Council parks and community facilities.

Successful activities will be delivered between 1 July 2024 to 30 June 2025. There will be a four week break from Monday 16 December 2024 to Sunday 12 January 2025. Activities are not delivered on public holidays.

**Please ensure you have read the ['Request for Proposal' information sheet](#) prior to submitting an application.**

**You can submit an application for as many different activities as you'd like to deliver; however, it's important to note, you can only add up to 8 activities per application. If you have more than 8 activities to submit, you'll need to put in a separate application form.**

Applications close on Monday 29 January 2024. We'll be in touch if you are successful by Friday 5 April 2024.

**Have you read the 'Request for Proposal' information sheet? \***

- ☐ Yes  
☐ No

Please read the information sheet and select 'yes' in order to continue.

**Please ensure you read the ['Request for Proposal' information sheet](#) before completing your application.**

### Business Information

\* indicates a required field

**Name of business/organisation \***

Organisation Name

**ABN \***

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

**Applicants name \***

Organisation Name

**Applicants role in the organisation \***

**Applicants Phone Number \***

Must be an Australian phone number.  
Please include area code.

**Applicants Email address \***

Must be an email address.

**Street Address \***

Address

Address Line 1, Suburb/Town, State/Province, and Postcode are required. Country must be Australia

**Mailing Address \***

Address

Address Line 1, Suburb/Town, State/Province, and Postcode are required. Country must be Australia

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

## Business/Organisation Website

Must be a URL.

## Business/Organisation Social Media Page

## Proposed Activity Information - Activity 1

\* indicates a required field

### Activity Outline

#### What is the name of your activity? \*

Note: Activity name may be changed if successful.

#### Please describe your activity: \*

Word count:

Must be at least 20 words.

This description will be used to promote your activity if successful.

#### Is this activity gentle or low intensity - suitable for seniors, expectant mothers or those with injury? \*

- ☐ Yes
- ☐ No
- ☐ Not applicable

#### What are the benefits of this activity for Logan residents? \*

Word count:

Must be at least 20 words.

Why is this activity needed in Logan?

#### Which category does this activity best align with? \*

- ☐ Fitness
- ☐ Health and wellbeing
- ☐ Sport, recreation and outdoors
- ☐ Stretch and move

Activities may be suitable for multiple categories, however, please choose which category is most reflective of this activity.

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Is this activity a cooking, nutrition, art or gardening class? \*

- ☐ Yes  
☐ No

## Activity Delivery

Logan City Council conducts an annual program survey to collect feedback from participants. We use this feedback to inform future programming and to ensure the Active & Healthy program is responsive to community needs.

The latest survey indicated participants have a preference to attend activities in the **afternoon, outside of work hours** and on **weekends**.

Council will preference activities that meet the needs of our community. Please keep this in mind when applying for activities.

What format is this activity delivered in? \*

- ☐ In person ☐ Online

How often will this activity be delivered? \*

E.g. Is your activity a one-off cooking workshop or a weekly bootcamp activity that occurs every Thursday?

## Activity dates

What day/s of the week would you be able to deliver this activity? \*

- ☐ Mondays ☐ Tuesdays ☐ Wednesdays ☐ Thursdays ☐ Fridays ☐ Saturdays ☐ Sundays

Please select all that apply.

Will this activity be delivered during the school holidays? \*

- ☐ Yes ☐ No

Providers are able to decide if their activity will continue to be delivered during school holidays.

What is the start date of this activity/ program?

Please outline specific activity date/s between 1 July 2024 and 30 June 2025. Must be a date.	Please outline specific activity date/s between 1 July 2024 and 30 June 2025. Must be a date.
--	--

What is the end date of this activity/ program?

Please specify: \*

Please outline when your activity would be delivered.

## Activity delivery times and duration

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

What is your preferred start and finish times and the duration of each session?

Start time	Finish time	How long is each session?	Would you be able to deliver this activity outside of standard business hours?
9:30 am	10:30 am	1 hour	<div><input type="checkbox"/> Yes, before 9am</div> <div><input type="checkbox"/> Yes, after 5pm</div> <div><input type="checkbox"/> Available on weekends</div> <div><input type="checkbox"/> No, unable to deliver outside of business hours</div> <div><input type="checkbox"/> Other:</div>
Please enter a time in the following format: H:MM am/pm	Please enter a time in the following format: H:MM am/pm	The length of time your activity will take to be delivered e.g. 1 hour.	Please select all that apply.

## Activity capacity

What is the maximum number of participants that can attend each session? \*

Must be a number.  
Please keep in mind venue capacity and safe ratio of participants to facilitator.

## Age group

Is this activity for a particular age group? \*

☐ Yes

☐ No (all ages)

E.g. children, over 50's, youth (12-17 years)

Please specify the age range for this activity

Minimum age	Maximum age
Must be a number.	Must be a number.

Is there a minimum or maximum age that can attend? \*

E.g. participants may need to be a minimum of 12 years of age to take part safely.

## Workshop delivery

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

If you are delivering a cooking, nutrition, art or gardening class, it is important for us to understand more about your classes and what is involved in their delivery.

Please note that cooking and nutrition class education and messaging should align with the [Australian Dietary Guidelines](#).

## What type of class or workshop are you delivering? \*

- ☐ Cooking
- ☐ Nutrition
- ☐ Arts and/or crafts
- ☐ Gardening

Please select one only

## Please describe what is involved in the delivery of your sessions, including set up and delivery: \*

Please ensure you describe the set-up, menu/recipes, preparation time etc.

## How will your cooking class be delivered? \*

- ☐ Demonstration
- ☐ Group activity (shared cooking)
- ☐ Hands-on class (each participant cooks their own meal)

## Please upload a sample menu (optional):

Attach a file:

This will assist in providing us with a better understanding of your activity.

## Activity Location

The Active & Healthy program is a Logan City Council funded program. The program gives preference to the use of our [parks](#) and community facilities. Activities delivered in a [Council Community Centre](#) or community facility may be eligible to have venue hire costs reimbursed, if a [Council park](#) is not a suitable option for activity delivery. **It is important to note that no venue hire will be paid for activities delivered in your place of business.**

Activities must be delivered within the City of Logan. A map of Logan City can be found [here](#).

Locations may be negotiated with you to ensure an even spread of activities across the City. The more flexible you are with activity locations, the better.

Activity delivery locations and any associated venue hire costs will be negotiated with the Community Programming Officer. If you are requesting venue hire, you may be required to provide proof of venue hire costs if your application progresses.

**Please note, it is solely your responsibility to make all relevant bookings in local parks and venues, should you be successful and this will be communicated to you on successful application.**

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**Do you have a park, community centre, or venue in mind to deliver this activity? \***

- ☐ Yes  
☐ No

**What is the name of the park/venue? \***

**What is the address of the park/venue? \***

Address

  

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

**Have you checked if this park/venue is available and suitable for your proposed activity? \***

- ☐ Yes ☐ No

You will be responsible for all aspects of organising this location/venue including payment and bookings, if your activity is successful.

**Is venue hire applicable? (Please don't include pool hire here) \***

- ☐ Yes ☐ No

Please note: there are no venue hire costs associated with delivery of an activity at a Council park.

**Are there pool hire costs to deliver this activity? \***

- ☐ Yes ☐ No

**Would you be willing to deliver this activity in an alternative location/venue? If so, please select all that apply: \***

- ☐ Yes, I can deliver this activity in a Council park  
☐ Yes, I can deliver this activity in a community centre or facility  
☐ No, the delivery location of this activity is not flexible  
☐ Other:

**What suburbs of Logan are you willing to service? \***

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> All suburbs in Logan | <input type="checkbox"/> Eagleby        | <input type="checkbox"/> Loganlea                | <input type="checkbox"/> Silverbark Ridge |
| <input type="checkbox"/> Bahrs Scrub          | <input type="checkbox"/> Edens Landing  | <input type="checkbox"/> Lyons                   | <input type="checkbox"/> Slacks Creek     |
| <input type="checkbox"/> Bannockburn          | <input type="checkbox"/> Flagstone      | <input type="checkbox"/> Maclean (North & South) | <input type="checkbox"/> Springwood       |
| <input type="checkbox"/> Beenleigh            | <input type="checkbox"/> Flinders Lakes | <input type="checkbox"/> Marsden                 | <input type="checkbox"/> Stockleigh       |
| <input type="checkbox"/> Belivah              | <input type="checkbox"/> Forestdale     | <input type="checkbox"/> Meadowbrook             | <input type="checkbox"/> Tamborine        |
| <input type="checkbox"/> Berrinba             | <input type="checkbox"/> Glenlogan      | <input type="checkbox"/> Monarch Glen            | <input type="checkbox"/> Tanah Merah      |
| <input type="checkbox"/> Bethania             | <input type="checkbox"/> Greenbank      | <input type="checkbox"/> Mount Warren Park       | <input type="checkbox"/> Underwood        |
| <input type="checkbox"/> Boronia Heights      | <input type="checkbox"/> Heritage Park  | <input type="checkbox"/> Mundoolun               | <input type="checkbox"/> Undullah         |
| <input type="checkbox"/> Browns Plains        | <input type="checkbox"/> Hillcrest      | <input type="checkbox"/> Munruben                | <input type="checkbox"/> Veresdale        |
| <input type="checkbox"/> Buccan               | <input type="checkbox"/> Holmview       | <input type="checkbox"/> New Beith               | <input type="checkbox"/> Veresdale Scrub  |
| <input type="checkbox"/> Carbrook             | <input type="checkbox"/> Jimboomba      | <input type="checkbox"/> Park Ridge              | <input type="checkbox"/> Waterford        |
| <input type="checkbox"/> Cedar Creek          | <input type="checkbox"/> Kagaru         | <input type="checkbox"/> Park Ridge South        | <input type="checkbox"/> Waterford West   |
| <input type="checkbox"/> Cedar Grove          | <input type="checkbox"/> Kairabah       | <input type="checkbox"/> Priestdale              | <input type="checkbox"/> Windaroo         |

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- |  |  |  |                                     |
|--|--|--|-------------------------------------|
| <input type="checkbox"/> Cedar Vale    | <input type="checkbox"/> Kingston      | <input type="checkbox"/> Regents Park    | <input type="checkbox"/> Wolffdene  |
| <input type="checkbox"/> Chambers Flat | <input type="checkbox"/> Logan Central | <input type="checkbox"/> Riverbend       | <input type="checkbox"/> Woodhill   |
| <input type="checkbox"/> Cornubia      | <input type="checkbox"/> Logan Reserve | <input type="checkbox"/> Rochedale South | <input type="checkbox"/> Woodridge  |
| <input type="checkbox"/> Crestmead     | <input type="checkbox"/> Logan Village | <input type="checkbox"/> Shailer Park    | <input type="checkbox"/> Yarrabilba |
| <input type="checkbox"/> Daisy Hill    | <input type="checkbox"/> Loganholme    |  |                                     |

**When looking at location options for your activity, please specify the following: \***

- ☐ I can deliver this activity in a Council park
- ☐ I can deliver this activity in a community centre or facility
- ☐ Other:

**Do you have any specific venue/location requirements for the delivery of your activity?**

## Booking Information

Activity contact information will be displayed to the general public for successful providers in the Active & Healthy booklet and as part of the wider marketing campaign. The information provided will consist of:

- trading name
- contact number
- email address
- booking webpage link (if relevant)

It is recommended you provide both a phone number and email address, however, if you would only like to provide one form of contact, please specify this below.

This contact information will be provided for all activities, whether or not bookings are required.

If bookings are required, please indicate below so we can ensure this is specified with your activity details.

**Are bookings required for your activity? \***

- ☐ Yes
- ☐ No

If bookings are not required, it is assumed that participants can show up on the day and partake in the activity

**Please provide either a contact name or business name for general public information and bookings:**

First Name Last Name

This name will be displayed in the Active & Healthy program booklet and website.



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**Please provide the email address for general public information and bookings:**

Must be an email address.

**Please provide the phone number for general public information and bookings:**

Must be an Australian phone number.

**If participants are able to book via a website, please provide a link:**

Must be a URL.

**Are participants required to bring anything to the activity? If so, please specify: \***

## Qualifications

**Are you delivering this activity as an Allied Health Professional? \***

- ☐ Yes  
☐ No

**What experience or qualifications do you have to deliver this activity? \***

**Please attach a copy of your relevant qualifications for this activity (if relevant)**

Attach a file:

**How does your qualification as an Allied Health Professional assist in the facilitation of this activity? \***

**Please upload a copy of your allied health qualifications: \***

Attach a file:

## Activity Costs

### Participant Fees

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

A small fee can be charged to participants at each activity. These participant fees are collected and retained by you, as the provider. If you'd prefer not to accept money from participants the activity can be listed as 'free'.

Please consider the benefits to the community of providing a free or low-cost class and choose the smallest participant fee possible to help reduce barriers to participation.

It is important to note, \$5 per person is the maximum amount that can be charged to participants.

**What will the cost be for participants to attend your activity? \***

- ☐ Free (no cost)
- ☐ \$1
- ☐ \$2
- ☐ \$3
- ☐ \$4
- ☐ \$5

**Please explain why the activity costs differ: \***

**Service Provider Funding**

Service provider funding of up to \$60 per hour is available for activities delivered in the Active & Healthy program. More detailed information about the program funding, including FAQ's, can be found [here](#).

Value for money is an important consideration when programming Active & Healthy activities. Please consider the potential funds obtained by collecting participant fees for your activity, and what hourly service provider rate you require to deliver your activity.

Please be advised that the provider fee paid is reflective of the activity delivery time. For example, you may choose to be paid \$40/hour, but only deliver a 30 minute activity. You would therefore receive a \$20 service provider fee for the 30 minute activity.

**What hourly service provider rate would you need to be reimbursed in order to successfully deliver your activity: \***

- ☐ \$20/hour
- ☐ \$30/hour
- ☐ \$40/hour
- ☐ \$50/hour
- ☐ \$60/hour

\$60 per hour is the maximum service provider fee available

**Please provide a justification for the rate you have requested: \***

Ensure you consider value for money and the funds collected from participant fees when deciding an hourly service provider rate.

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**Do you require payment of the Allied Health subsidy (an additional \$10/hr for your activity in addition to your service provider fee) in order to deliver your activity? \***

- ☐ Yes
- ☐ No

## Workshop - Cost Breakdown

To enable the delivery of cooking, arts and gardening workshops, additional funding may be provided for consumables associated with your class delivery. Items that may be funded include:

- **Cooking:** Cooking ingredients, pantry essentials and consumable items including things such as paper towel and alfoil.
- **Arts:** Consumable materials (does not include equipment such as brushes, easels)
- **Gardening:** Soil, seeds/seedlings, plastic pots

Please provide a detailed cost breakdown of any expenses you are requesting to be funded. Please ensure this cost breakdown is for one session only. **Please do not include in-kind expenses in this cost breakdown.**

Please note, you may be required to show proof of consumable costs if your application progresses.

Expenses	Cost
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

## Venue Hire Costs

**What is the hourly rate to hire your preferred venue? \***

\$

Must be a dollar amount.  
Please be aware that you may be required to provide a quote for venue hire costs if your application is successful.

**Please demonstrate why your activity requires use of a community facility? \***

Venue hire costs may be reimbursed if your activity requires use of a community facility and cannot be delivered in another public space such as a Council park.

## Pool Hire - Cost Breakdown

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## Form Preview

To enable the delivery of activities requiring the use of a pool, additional funding may be provided to cover pool hire costs.

**Please provide a detailed cost breakdown of any expenses you are requesting to be funded. Please ensure this cost breakdown is reflective of the costs for one activity session (e.g. 1 hour class). Please do not include in-kind expenses in this cost breakdown.**

Please note, you may be required to show proof of pool hire costs if your application progresses.

Expenses	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

Existing activity

**Is this activity already being delivered in the community? \***

☐ Yes ☐ No

**Is the activity already being delivered happening at the same day, time and location as requested above in your application? \***

☐ Yes ☐ No

**Does the existing activity currently receive funding for delivery? \***

☐ Yes ☐ No

**Please provide more information as to why this existing activity requires Active & Healthy funding: \***

Other Activity Information

**If there is any information about your activity that hasn't been covered above, please outline here:**

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**Would you like to apply for another activity? \***

- ☐ Yes
- ☐ No

## Proposed Activity Information - Activity 2

**\* indicates a required field**

### Activity Outline

**What is the name of your activity? \***

Note: Activity name may be changed if successful.

**Please describe your activity: \***

Word count:

Must be at least 20 words.

This description will be used to promote your activity if successful.

**Would you describe this activity as gentle/low intensity - suitable for seniors, expectant mothers or those with injury? \***

- ☐ Yes
- ☐ No
- ☐ Not applicable

**What are the benefits of this activity for Logan residents? \***

Word count:

Must be at least 20 words.

Why is this activity needed in Logan?

**Which category does this activity best align with? \***

- ☐ Fitness
- ☐ Health and wellbeing
- ☐ Sport, recreation and outdoors
- ☐ Stretch and move

**Is this activity a cooking, art or gardening class? \***

- ☐ Yes
- ☐ No

### Activity Delivery

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

In the latest annual program survey, respondents indicated their preference to attend activities in the afternoon, outside of work hours and on weekends. Council will preference activities that meet the needs of our community. Please keep this in mind when completing this part of the application.

**What format is this activity delivered in? \***

- ☐ In person ☐ Online

**Is this activity for a particular age group? \***

- ☐ Yes ☐ No (all ages)

E.g. children, over 50's, youth (12-17 years)

**Please specify what age group this activity is for? \***

**Is there a minimum or maximum age that can attend? \***

E.g. participants may need to be a minimum of 12 years of age to take part safely.

**What is the maximum number of participants that can attend each session? \***

Must be a number.  
Please keep in mind venue capacity and safe ratio of participants to facilitator.

**How long will this activity run per session? \***

The length of time your activity will take to be delivered e.g. 1 hour.

**What is your preferred time of day to deliver this activity? \***

Please indicate an idea of time e.g. 9am or if flexible: mid-morning.

**Would you be able to deliver this activity outside of standard business hours? \***

- ☐ Yes, before 9am  
☐ Yes, after 5pm  
☐ Available on weekends  
☐ No, unable to deliver outside of business hours  
☐ Other:

Please select all that apply.

**How often will this activity be delivered? \***

E.g. Is your activity a one-off cooking workshop or a weekly bootcamp activity that occurs every Thursday?

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## What day/s of the week would you be able to deliver this activity? \*

☐ Mondays ☐ Tuesdays ☐ Wednesdays ☐ Thursdays ☐ Fridays ☐ Saturdays ☐ Sundays

Please select all that apply.

## Will this activity be delivered during the school holidays? \*

☐ Yes ☐ No

Providers are able to decide if their activity will continue to be delivered during school holidays.

## What date/s will this activity be delivered? \*

Please outline specific activity date/s between 1 July 2023 and 30 June 2024.

## Please specify: \*

Please outline when your activity would be delivered.

## Is this activity already being delivered in the community? \*

☐ Yes ☐ No

## Is the activity already being delivered happening at the same day, time and location as requested above in your application? \*

☐ Yes ☐ No

## Does the existing activity currently receive funding for delivery? \*

☐ Yes ☐ No

## Please provide more information as to why this existing activity requires Active and Healthy funding: \*

## Cooking Class Delivery

If you are delivering a cooking or nutrition class, it is important for us to understand more about your classes and what is involved in their delivery.

Please note that wherever possible, class messaging should align with the [Australian Dietary Guidelines](#).

## Please describe what is involved in the delivery of your sessions, including set up and delivery: \*

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Please ensure you describe the set-up, menu/recipes, preparation time etc.

**If you are delivering a cooking class, how will your activity be delivered? \***

- ☐ Demonstration
- ☐ Group activity (shared cooking)
- ☐ Hands-on class (each participant cooks their own meal)

**Please upload a sample menu (optional):**

Attach a file:

This will assist in providing us with a better understanding of your activity.

## Qualifications

**Are you delivering this activity as an Allied Health Professional? \***

- ☐ Yes
- ☐ No

**What experience or qualifications do you have to deliver this activity? \***

**Please attach a copy of your relevant qualifications for this activity (if relevant)**

Attach a file:

**How does your qualification as an Allied Health Professional assist in the facilitation of this activity? \***

**Please upload a copy of your allied health qualifications: \***

Attach a file:

## Activity Location

The Active and Healthy program is a Logan City Council funded program. The program gives preference to the use of our [parks](#) and community facilities. Activities delivered in a [Council Community Centre](#) or community facility may be eligible to have venue hire costs reimbursed if a [Council park](#) is not a suitable option for activity delivery. **It is important**



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**to note that no venue hire will be paid for activities delivered in your place of business.**

Activities must be delivered within the City of Logan. A map of Logan City can be found [here](#).

Locations may be negotiated with you to ensure an even spread of activities across the City. The more flexible you are with activity locations, the better.

Activity delivery locations and any associated venue hire costs will be negotiated with the Community Programming Officer. If you are requesting venue hire, you may be required to provide proof of venue hire costs if your application progresses.

**Please note, it is solely your responsibility to make all relevant bookings in local parks and venues, should you be successful and this will be communicated to you on successful application.**

**Do you have a park, community centre, or venue in mind to deliver this activity? \***

- ☐ Yes  
☐ No

**What is the name of the park/venue? \***

**What is the address of the park/venue? \***

Address

  

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

**Have you checked if this park/venue is available and suitable for your proposed activity? \***

- ☐ Yes ☐ No  
You will be responsible for all aspects of organising this location/venue including payment and bookings, if your activity is successful.

**Is venue hire applicable? (Please don't include pool hire here) \***

- ☐ Yes ☐ No

**Are there pool hire costs to deliver this activity? \***

- ☐ Yes ☐ No

**Would you be willing to deliver this activity in an alternative location/venue? If so, please select all that apply: \***

- ☐ Yes, I can deliver this activity in a Council park  
☐ Yes, I can deliver this activity in a community centre or facility  
☐ No, the delivery location of this activity is not flexible  
☐ Other:

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

## What suburbs of Logan are you willing to service? \*

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> All suburbs in Logan | <input type="checkbox"/> Eagleby        | <input type="checkbox"/> Loganlea                | <input type="checkbox"/> Silverbark Ridge |
| <input type="checkbox"/> Bahrs Scrub          | <input type="checkbox"/> Edens Landing  | <input type="checkbox"/> Lyons                   | <input type="checkbox"/> Slacks Creek     |
| <input type="checkbox"/> Bannockburn          | <input type="checkbox"/> Flagstone      | <input type="checkbox"/> Maclean (North & South) | <input type="checkbox"/> Springwood       |
| <input type="checkbox"/> Beenleigh            | <input type="checkbox"/> Flinders Lakes | <input type="checkbox"/> Marsden                 | <input type="checkbox"/> Stockleigh       |
| <input type="checkbox"/> Belivah              | <input type="checkbox"/> Forestdale     | <input type="checkbox"/> Meadowbrook             | <input type="checkbox"/> Tamborine        |
| <input type="checkbox"/> Berrinba             | <input type="checkbox"/> Glenlogan      | <input type="checkbox"/> Monarch Glen            | <input type="checkbox"/> Tanah Merah      |
| <input type="checkbox"/> Bethania             | <input type="checkbox"/> Greenbank      | <input type="checkbox"/> Mount Warren Park       | <input type="checkbox"/> Underwood        |
| <input type="checkbox"/> Boronia Heights      | <input type="checkbox"/> Heritage Park  | <input type="checkbox"/> Mundoolun               | <input type="checkbox"/> Undullah         |
| <input type="checkbox"/> Browns Plains        | <input type="checkbox"/> Hillcrest      | <input type="checkbox"/> Munruben                | <input type="checkbox"/> Veresdale        |
| <input type="checkbox"/> Buccan               | <input type="checkbox"/> Holmview       | <input type="checkbox"/> New Beith               | <input type="checkbox"/> Veresdale Scrub  |
| <input type="checkbox"/> Carbrook             | <input type="checkbox"/> Jimboomba      | <input type="checkbox"/> Park Ridge              | <input type="checkbox"/> Waterford        |
| <input type="checkbox"/> Cedar Creek          | <input type="checkbox"/> Kagaru         | <input type="checkbox"/> Park Ridge South        | <input type="checkbox"/> Waterford West   |
| <input type="checkbox"/> Cedar Grove          | <input type="checkbox"/> Kairabah       | <input type="checkbox"/> Priestdale              | <input type="checkbox"/> Windaroo         |
| <input type="checkbox"/> Cedar Vale           | <input type="checkbox"/> Kingston       | <input type="checkbox"/> Regents Park            | <input type="checkbox"/> Wolffdene        |
| <input type="checkbox"/> Chambers Flat        | <input type="checkbox"/> Logan Central  | <input type="checkbox"/> Riverbend               | <input type="checkbox"/> Woodhill         |
| <input type="checkbox"/> Cornubia             | <input type="checkbox"/> Logan Reserve  | <input type="checkbox"/> Rochedale South         | <input type="checkbox"/> Woodridge        |
| <input type="checkbox"/> Crestmead            | <input type="checkbox"/> Logan Village  | <input type="checkbox"/> Shailer Park            | <input type="checkbox"/> Yarrabilba       |
| <input type="checkbox"/> Daisy Hill           | <input type="checkbox"/> Loganholme     |  |   |

## When looking at location options for your activity, please specify the following: \*

- ☐ I can deliver this activity in a Council park
- ☐ I can deliver this activity in a community centre or facility
- ☐ Other:

## Do you have any specific venue/location requirements for the delivery of your activity?

## Activity Costs

### Participant Fees

A small fee can be charged to participants at each activity. These participant fees are collected and retained by you, as the provider. If you'd prefer not to accept money from participants the activity can be listed as 'free'.

Please consider the benefits to the community of providing a free or low-cost class and choose the smallest participant fee possible to help reduce barriers to participation.

It is important to note, \$5 per person is the maximum amount that can be charged to participants.

## What will the cost be for participants to attend your activity? \*

- ☐ Free (no cost)
- ☐ \$1
- ☐ \$2

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

- ☐ \$3
- ☐ \$4
- ☐ \$5

**Please explain why the activity costs differ \***

## Service Provider Funding

Service provider funding of up to \$60 per hour is available for activities delivered in the Active & Healthy program. More detailed information about the [program funding, including FAQ's, can be found here](#).

Value for money is an important consideration when programming Active and Healthy activities. Please consider the potential funds obtained by collecting participant fees for your activity, and what hourly service provider rate you require to deliver your activity.

Please be advised that the provider fee paid is reflective of the activity delivery time. For example, you may opt to be paid \$40/hour, but only deliver a 30 minute activity. You would therefore receive a \$20 service provider fee for the 30 minute activity.

**What hourly service provider rate would you need to be reimbursed in order to successfully deliver your activity: \***

- ☐ \$20/hour
- ☐ \$30/hour
- ☐ \$40/hour
- ☐ \$50/hour
- ☐ \$60/hour

\$60 per hour is the maximum service provider fee available

**Please provide a justification for the rate you have requested:**

Ensure you consider value for money and the funds collected from participant fees when deciding an hourly service provider rate.

**Do you require payment of the Allied Health subsidy (an additional \$10/hr for your activity in addition to your service provider fee) in order to deliver your activity? \***

- ☐ Yes
- ☐ No

## Cooking Class - Cost Breakdown

To enable the delivery of cooking workshops, additional funding may be provided for consumables associated with your cooking class delivery. Items that may be funded include cooking ingredients, pantry essentials and consumable items including things such as paper towel and foil.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

Please provide a detailed cost breakdown of any expenses you are requesting to be funded. Please ensure this cost breakdown is for one cooking class session. **Please do not include in-kind expenses in this cost breakdown.**

Please note, you may be required to show proof of consumable costs if your application progresses.

Expenses	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

## Venue Hire Costs

What is the hourly rate to hire the venue?

\$

Must be a dollar amount.  
Please be aware that you may be required to provide a quote for venue hire costs if your application is successful.

## Pool Hire - Cost Breakdown

To enable the delivery of activities requiring the use of a pool, additional funding may be provided to cover pool hire costs.

**Please provide a detailed cost breakdown of any expenses you are requesting to be funded. Please ensure this cost breakdown is reflective of the costs for one activity session (e.g. 1 hour class). Please do not include in-kind expenses in this cost breakdown.**

Please note, you may be required to show proof of pool hire costs if your application progresses.

Expenses	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

## Access and Inclusion

Logan City Council are committed to ensuring that people of all abilities and backgrounds are able to fulfil their potential in the City of Logan.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

Providers are expected to ensure activities are accessible and inclusive wherever possible.

## How will you ensure your activity is accessible and inclusive of the wider Logan community? \*

Word count:

Must be at least 20 words.

This includes accessible classes for those with disability (visible and non-visible), and inclusive of those from diverse cultural backgrounds and our First Nations People.

## Booking Information

Activity contact information will be displayed to the general public for successful providers in the Active and Healthy booklet and as part of the wider marketing campaign. The information provided will consist of:

- trading name
- contact number
- email address
- booking webpage link (if relevant)

It is recommended you provide both a phone number and email address, however, if you would only like to provide one form of contact, please specify this below.

This contact information will be provided for all activities, whether or not bookings are required.

If bookings are required, please indicate below so we can ensure this is specified with your activity details.

## Are bookings required for your activity? \*

- ☐ Yes  
☐ No

If bookings are not required, it is assumed that participants can show up on the day and partake in the activity.

## Please provide the email address for general public information and bookings:

Must be an email address.

## Please provide the phone number for general public information and bookings:

Must be an Australian phone number.

## If participants are able to book via a website, please provide a link:

Must be a URL.

## Are participants required to bring anything to the activity? If so, please specify: \*

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

## Activity Promotion

If successful, we will promote your activity as part of our Active and Healthy booklet and wider marketing campaign.

However, as the provider, you are ultimately responsible for the promotion and success of your individual activity/s. Activities which consistently have low or no attendance after a three month period may be removed from the program.

**What steps will you take to promote your activity? \***

## Other Activity Information

**If there is any information about your activity that hasn't been covered above, please outline here:**

**Would you like to apply for another activity? \***

- ☐ Yes  
☐ No

## Proposed Activity Information - Activity 3

*\* indicates a required field*

### Activity Outline

**What is the name of your activity? \***

Note: Activity name may be changed if successful.

**Please describe your activity: \***

Word count:

Must be at least 20 words.

This description will be used to promote your activity if successful.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**Would you describe this activity as gentle/low intensity - suitable for seniors, expectant mothers or those with injury? \***

- ☐ Yes
- ☐ No
- ☐ Not applicable

**What are the benefits of this activity for Logan residents? \***

Word count:

Must be at least 20 words.

Why is this activity needed in Logan?

**Which category does this activity best align with? \***

- ☐ Fitness
- ☐ Health and wellbeing
- ☐ Sport, recreation and outdoors
- ☐ Stretch and move

Activities may be suitable for multiple categories, however, please choose which category is most reflective of this activity.

**Is this activity a cooking, art or gardening class? \***

- ☐ Yes
- ☐ No

## Activity Delivery

In the latest annual program survey, respondents indicated their preference to attend activities in the afternoon, outside of work hours and on weekends. Council will preference activities that meet the needs of our community. Please keep this in mind when completing this part of the application.

**What format is this activity delivered in? \***

- ☐ In person
- ☐ Online

**Is this activity for a particular age group? \***

- ☐ Yes
- ☐ No (all ages)

E.g. children, over 50's, youth (12-17 years)

**Please specify what age group this activity is for? \***

**Is there a minimum or maximum age that can attend? \***

E.g. participants may need to be a minimum of 12 years of age to take part safely.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**What is the maximum number of participants that can attend each session? \***

Must be a number.  
Please keep in mind venue capacity and safe ratio of participants to facilitator.

**How long will this activity run per session? \***

The length of time your activity will take to be delivered e.g. 1 hour.

**What is your preferred time of day to deliver this activity? \***

Please indicate an idea of time e.g. 9am or if flexible: mid-morning.

**Would you be able to deliver your activity outside of standard business hours? \***

- ☐ Yes, before 9am  
☐ Yes, after 5pm  
☐ Available on weekends  
☐ No, unable to deliver outside of business hours  
☐ Other:

Please select all that apply.

**How often will this activity be delivered? \***

E.g. Is your activity a one-off cooking workshop or a weekly bootcamp activity that occurs every Thursday?

**What day/s of the week would you be able to deliver your activity? \***

☐ Mondays ☐ Tuesdays ☐ Wednesdays ☐ Thursdays ☐ Fridays ☐ Saturdays ☐ Sundays

Please select all that apply.

**Will this activity be delivered during the school holidays? \***

☐ Yes ☐ No

Providers are able to decide if their activity will continue to be delivered during school holidays.

**What date/s will this activity be delivered? \***

Please outline specific activity date/s between 1 July 2023 and 30 June 2024.

**Please specify: \***

Please outline when your activity would be delivered.



# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**Is this activity already being delivered in the community? \***

- ☐ Yes ☐ No

**Is the activity already being delivered happening at the same day, time and location as requested above in your application? \***

- ☐ Yes ☐ No

**Does the existing activity currently receive funding for delivery? \***

- ☐ Yes ☐ No

**Please provide more information as to why this existing activity requires Active and Healthy funding: \***

## Cooking Class Delivery

If you are delivering a cooking or nutrition class, it is important for us to understand more about your classes and what is involved in their delivery.

Please note that wherever possible, class messaging should align with the [Australian Dietary Guidelines](#).

**Please describe what is involved in the delivery of your sessions, including set up and delivery: \***

Please ensure you describe the set-up, menu/recipes, preparation time etc.

**If you are delivering a cooking class, how will your activity be delivered? \***

- ☐ Demonstration  
☐ Group activity (shared cooking)  
☐ Hands-on class (each participant cooks their own meal)

**Please upload a sample menu (optional):**

Attach a file:

This will assist in providing us with a better understanding of your activity.

## Qualifications

**Are you delivering this activity as an Allied Health Professional? \***

- ☐ Yes  
☐ No

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**What experience/qualifications do you have to deliver this activity? \***

**Please attach a copy of your relevant qualifications for this activity (if relevant)**

Attach a file:

**How does your qualification as an Allied Health Professional assist in the facilitation of this activity? \***

**Please upload a copy of your allied health qualifications: \***

Attach a file:

## Activity Location

The Active and Healthy program is a Logan City Council funded program. The program gives preference to the use of our [parks](#) and community facilities. Activities delivered in a [Council Community Centre](#) or community facility may be eligible to have venue hire costs reimbursed if a [Council park](#) is not a suitable option for activity delivery. **It is important to note that no venue hire will be paid for activities delivered in your place of business.**

Activities must be delivered within the City of Logan. A map of Logan City can be found [here](#).

Locations may be negotiated with you to ensure an even spread of activities across the City. The more flexible you are with activity locations, the better.

Activity delivery locations and any associated venue hire costs will be negotiated with the Community Programming Officer. If you are requesting venue hire, you may be required to provide proof of venue hire costs if your application progresses.

**Please note, it is solely your responsibility to make all relevant bookings in local parks and venues, should you be successful and this will be communicated to you on successful application.**

**Do you have a park, community centre, or venue in mind to deliver this activity? \***

- ☐ Yes  
☐ No

**What is the name of the park/venue? \***

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**What is the address of the park/venue? \***

Address

  

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

**Have you checked if this park/venue is available and suitable for your proposed activity? \***

☐ Yes

☐ No

You will be responsible for all aspects of organising this location/venue including payment and bookings, if your activity is successful.

**Is venue hire applicable? (Please don't include pool hire here) \***

☐ Yes

☐ No

Please note: there are no venue hire costs associated with delivery of an activity at a Council park.

**Are there pool hire costs to deliver this activity? \***

☐ Yes

☐ No

**Would you be willing to deliver this activity in an alternative location/venue? If so, please select all that apply: \***

- ☐ Yes, I can deliver this activity in a Council park
- ☐ Yes, I can deliver this activity in a community centre or facility
- ☐ No, the delivery location of this activity is not flexible
- ☐ Other:

**What suburbs of Logan are you willing to service? \***

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> All suburbs in Logan | <input type="checkbox"/> Eagleby        | <input type="checkbox"/> Loganlea                | <input type="checkbox"/> Silverbark Ridge |
| <input type="checkbox"/> Bahrs Scrub          | <input type="checkbox"/> Edens Landing  | <input type="checkbox"/> Lyons                   | <input type="checkbox"/> Slacks Creek     |
| <input type="checkbox"/> Bannockburn          | <input type="checkbox"/> Flagstone      | <input type="checkbox"/> Maclean (North & South) | <input type="checkbox"/> Springwood       |
| <input type="checkbox"/> Beenleigh            | <input type="checkbox"/> Flinders Lakes | <input type="checkbox"/> Marsden                 | <input type="checkbox"/> Stockleigh       |
| <input type="checkbox"/> Belivah              | <input type="checkbox"/> Forestdale     | <input type="checkbox"/> Meadowbrook             | <input type="checkbox"/> Tamborine        |
| <input type="checkbox"/> Berrinba             | <input type="checkbox"/> Glenlogan      | <input type="checkbox"/> Monarch Glen            | <input type="checkbox"/> Tanah Merah      |
| <input type="checkbox"/> Bethania             | <input type="checkbox"/> Greenbank      | <input type="checkbox"/> Mount Warren Park       | <input type="checkbox"/> Underwood        |
| <input type="checkbox"/> Boronia Heights      | <input type="checkbox"/> Heritage Park  | <input type="checkbox"/> Mundoolun               | <input type="checkbox"/> Undullah         |
| <input type="checkbox"/> Browns Plains        | <input type="checkbox"/> Hillcrest      | <input type="checkbox"/> Munruben                | <input type="checkbox"/> Veresdale        |
| <input type="checkbox"/> Buccan               | <input type="checkbox"/> Holmview       | <input type="checkbox"/> New Beith               | <input type="checkbox"/> Veresdale Scrub  |
| <input type="checkbox"/> Carbrook             | <input type="checkbox"/> Jimboomba      | <input type="checkbox"/> Park Ridge              | <input type="checkbox"/> Waterford        |
| <input type="checkbox"/> Cedar Creek          | <input type="checkbox"/> Kagaru         | <input type="checkbox"/> Park Ridge South        | <input type="checkbox"/> Waterford West   |
| <input type="checkbox"/> Cedar Grove          | <input type="checkbox"/> Kairabah       | <input type="checkbox"/> Priestdale              | <input type="checkbox"/> Windaroo         |
| <input type="checkbox"/> Cedar Vale           | <input type="checkbox"/> Kingston       | <input type="checkbox"/> Regents Park            | <input type="checkbox"/> Wolffdene        |
| <input type="checkbox"/> Chambers Flat        | <input type="checkbox"/> Logan Central  | <input type="checkbox"/> Riverbend               | <input type="checkbox"/> Woodhill         |
| <input type="checkbox"/> Cornubia             | <input type="checkbox"/> Logan Reserve  | <input type="checkbox"/> Rochedale South         | <input type="checkbox"/> Woodridge        |
| <input type="checkbox"/> Crestmead            | <input type="checkbox"/> Logan Village  | <input type="checkbox"/> Shailer Park            | <input type="checkbox"/> Yarrabilba       |
| <input type="checkbox"/> Daisy Hill           | <input type="checkbox"/> Loganholme     |  |   |

**When looking at location options for your activity, please specify the following:**

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

- ☐ I can deliver this activity in a Council park
- ☐ I can deliver this activity in a community centre or facility
- ☐ Other:

**Do you have any specific venue/location requirements for the delivery of your activity?**

## Activity Costs

### Participant Fees

A small fee can be charged to participants at each activity. These participant fees are collected and retained by you, as the provider. If you'd prefer not to accept money from participants the activity can be listed as 'free'.

Please consider the benefits to the community of providing a free or low-cost class and choose the smallest participant fee possible to help reduce barriers to participation.

It is important to note, \$5 per person is the maximum amount that can be charged to participants.

**What will the cost be for participants to attend your activity? \***

- ☐ Free (no cost)
- ☐ \$1
- ☐ \$2
- ☐ \$3
- ☐ \$4
- ☐ \$5

**Please explain why the activity costs differ \***

### Service Provider Funding

Service provider funding of up to \$60 per hour is available for activities delivered in the Active and Healthy program. More detailed information about the [program funding, including FAQ's, can be found here](#).

Value for money is an important consideration when programming Active and Healthy activities. Please consider the potential funds obtained by collecting participant fees for your activity, and what hourly service provider rate you require to deliver your activity.

Please be advised that the provider fee paid is reflective of the activity delivery time. For example, you may opt to be paid \$40/hour, but only deliver a 30 minute activity. You would therefore receive a \$20 service provider fee for the 30 minute activity.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**What hourly service provider rate would you need to be reimbursed in order to successfully deliver your activity: \***

- ☐ \$20/hour
- ☐ \$30/hour
- ☐ \$40/hour
- ☐ \$50/hour
- ☐ \$60/hour

\$60 per hour is the maximum service provider fee available

**Please provide a justification for the rate you have requested:**

Ensure you consider value for money and the funds collected from participant fees when deciding an hourly service provider rate.

**Do you require payment of the Allied Health subsidy (an additional \$10/hr for your activity in addition to your service provider fee) in order to deliver your activity? \***

- ☐ Yes
- ☐ No

## Cooking Class - Cost Breakdown

To enable the delivery of cooking workshops, additional funding may be provided for consumables associated with your cooking class delivery. Items that may be funded include cooking ingredients, pantry essentials and consumable items including things such as paper towel and foil.

Please provide a detailed cost breakdown of any expenses you are requesting to be funded. Please ensure this cost breakdown is for one cooking class session. **Please do not include in-kind expenses in this cost breakdown.**

Please note, you may be required to show proof of consumable costs if your application progresses.

Expenses	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

## Venue Hire Costs

**What is the hourly rate to hire the venue?**

\$

Must be a dollar amount.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

Please be aware that you may be required to provide a quote for venue hire costs if your application is successful.

## Pool Hire - Cost Breakdown

To enable the delivery of activities requiring the use of a pool, additional funding may be provided to cover pool hire costs.

**Please provide a detailed cost breakdown of any expenses you are requesting to be funded. Please ensure this cost breakdown is reflective of the costs for one activity session (e.g. 1 hour class). Please do not include in-kind expenses in this cost breakdown.**

Please note, you may be required to show proof of pool hire costs if your application progresses.

Expenses	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

## Access and Inclusion

Logan City Council are committed to ensuring that people of all abilities and backgrounds are able to fulfil their potential in the City of Logan.

Providers are expected to ensure activities are accessible and inclusive wherever possible.

**How will you ensure your activity is accessible and inclusive of the wider Logan community? \***

Word count:

This includes accessible classes for those with disability (visible and non-visible), and inclusive of those from diverse cultural backgrounds and our First Nations People.

## Booking Information

Activity contact information will be displayed to the general public for successful providers in the Active and Healthy booklet and as part of the wider marketing campaign. The information provided will consist of:

- trading name
- contact number
- email address

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

- booking webpage link (if relevant)

It is recommended you provide both a phone number and email address, however, if you would only like to provide one form of contact, please specify this below.

This contact information will be provided for all activities, despite whether or not bookings are required.

If bookings are required, please indicate below so we can ensure this is specified with your activity details.

## Are bookings required for your activity? \*

- ☐ Yes  
☐ No

If bookings are not required, it is assumed that participants can show up on the day and partake in the activity

## Please provide the email address for general public information and bookings:

Must be an email address.

## Please provide the phone number for general public information and bookings:

Must be an Australian phone number.

## If participants are able to book via a website, please provide a link:

Must be a URL.

## Are participants required to bring anything to the activity? If so, please specify: \*

## Activity Promotion

If successful, we will promote your activity in our Active and Healthy booklet and as part of our wider marketing campaign.

However, as the provider, you are ultimately responsible for the promotion and success of your individual activity/s. Activities which consistently have low or no attendance after a three month period may be removed from the program.

## What steps will you take to promote your activity to ensure success? \*

## Other Activity Information

If there is any information about your activity that hasn't been covered above, please outline here:

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**Would you like to apply for another activity? \***

- ☐ Yes  
☐ No

## Proposed Activity Information - Activity 4

\* indicates a required field

### Activity Outline

**What is the name of your activity? \***

Note: Activity name may be changed if successful.

**Please describe your activity: \***

Word count:

Must be at least 20 words.

This description will be used to promote your activity if successful.

**Would you describe this activity as gentle/low intensity - suitable for seniors, expectant mothers or those with injury?**

- ☐ Yes  
☐ No  
☐ Not applicable

**What are the benefits of this activity for Logan residents? \***

Word count:

Must be at least 20 words.

Why is this activity needed in Logan?

**Which category does this activity best align with? \***

- ☐ Fitness  
☐ Health and wellbeing  
☐ Sport, recreation and outdoors  
☐ Stretch and move

Activities may be suitable for multiple categories, however, please choose which category is most reflective of this activity.



# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

## Is this activity a cooking, art or gardening class?

- ☐ Yes  
☐ No

## Activity Delivery

In the latest annual program survey, respondents indicated their preference to attend activities in the afternoon, outside of work hours and on weekends. Council will preference activities that meet the needs of our community. Please keep this in mind when completing this part of the application.

## What format is this activity delivered in? \*

- ☐ In person ☐ Online

## Is this activity for a particular age group? \*

- ☐ Yes ☐ No (all ages)

E.g. children, over 50's, youth (12-17 years)

## Please specify what age group this activity is for? \*

## Is there a minimum or maximum age that can attend?

E.g. participants may need to be a minimum of 12 years of age to take part safely.

## What is the maximum number of participants that can attend each session? \*

Must be a number.  
Please keep in mind venue capacity and safe ratio of participants to facilitator.

## How long will this activity run per session? \*

The length of time your activity will take to be delivered e.g. 1 hour.

## What is your preferred time of day to deliver this activity? \*

Please indicate an idea of time e.g. 9am or if flexible: mid-morning.

## Would you be able to deliver this activity outside of standard business hours? \*

- ☐ Yes, before 9am  
☐ Yes, after 5pm  
☐ Available on weekends  
☐ No, unable to deliver outside of business hours  
☐ Other:

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

Please select all that apply.

## How often will this activity be delivered? \*

E.g. Is your activity a one-off cooking workshop or a weekly bootcamp activity that occurs every Thursday?

## What day/s of the week would you be able to deliver this activity? \*

☐ Mondays ☐ Tuesdays ☐ Wednesdays ☐ Thursdays ☐ Fridays ☐ Saturdays ☐ Sundays

Please select all that apply.

## Will this activity be delivered during the school holidays? \*

☐ Yes ☐ No

Providers are able to decide if their activity will continue to be delivered during school holidays.

## What date/s will this activity be delivered? \*

Please outline specific activity date/s between 1 July 2023 and 30 June 2024.

## Please specify: \*

Please outline when your activity would be delivered.

## Is this activity already being delivered in the community? \*

☐ Yes ☐ No

## Is the activity already being delivered happening at the same day, time and location as requested above in your application? \*

☐ Yes ☐ No

## Does the existing activity currently receive funding for delivery? \*

☐ Yes ☐ No

## Please provide more information as to why this existing activity requires Active and Healthy funding: \*

Cooking Class Delivery

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

If you are delivering a cooking or nutrition class, it is important for us to understand more about your classes and what is involved in their delivery.

Please note that cooking class messaging should align with the [Australian Dietary Guidelines](#).

**Please describe what is involved in the delivery of your sessions, including set up and delivery: \***

Please ensure you describe the set-up, menu/recipes, preparation time etc.

**If you are delivering a cooking class, how will your activity be delivered? \***

- ☐ Demonstration
- ☐ Group activity (shared cooking)
- ☐ Hands-on class (each participant cooks their own meal)

**Please upload a sample menu (optional):**

Attach a file:

This will assist in providing us with a better understanding of your activity.

## Qualifications

**Are you delivering this activity as an Allied Health Professional? \***

- ☐ Yes
- ☐ No

**What experience or qualifications do you have to deliver this activity? \***

**Please attach a copy of your relevant qualifications for this activity (if relevant)**

Attach a file:

**How does your qualification as an Allied Health Professional assist in the facilitation of this activity? \***

**Please upload a copy of your allied health qualifications: \***

Attach a file:

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

## Activity Location

The Active and Healthy program is a Logan City Council funded program. The program gives preference to the use of our [parks](#) and community facilities. Activities delivered in a [Council Community Centre](#) or community facility may be eligible to have venue hire costs reimbursed if a [Council park](#) is not a suitable option for activity delivery. **It is important to note that no venue hire will be paid for activities delivered in your place of business.**

Activities must be delivered within the City of Logan. A map of Logan City can be found [here](#).

Locations may be negotiated with you to ensure an even spread of activities across the City. The more flexible you are with activity locations, the better.

Activity delivery locations and any associated venue hire costs will be negotiated with the Community Programming Officer. If you are requesting venue hire, you may be required to provide proof of venue hire costs if your application progresses.

**Please note, it is solely your responsibility to make all relevant bookings in local parks and venues, should you be successful and this will be communicated to you on successful application.**

**Do you have a park, community centre, or venue in mind to deliver this activity? \***

- ☐ Yes  
☐ No

**What is the name of the park/venue? \***

**What is the address of the park/venue? \***

Address

  

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

**Have you checked if this park/venue is available and suitable for your proposed activity? \***

- ☐ Yes ☐ No

You will be responsible for all aspects of organising this location/venue including payment and bookings, if your activity is successful.

**Is venue hire applicable? (Please don't include pool hire here) \***

- ☐ Yes ☐ No

Please note: there are no venue hire costs associated with delivery of an activity at a Council park.

**Are there pool hire costs to deliver this activity? \***

- ☐ Yes ☐ No

**Would you be willing to deliver this activity in an alternative location/venue? If so, please select all that apply: \***

- ☐ Yes, I can deliver this activity in a Council park

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

- ☐ Yes, I can deliver this activity in a community centre or facility  
☐ No, the delivery location of this activity is not flexible  
☐ Other:

## What suburbs of Logan are you willing to service?

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> All suburbs in Logan | <input type="checkbox"/> Eagleby        | <input type="checkbox"/> Loganlea                | <input type="checkbox"/> Silverbark Ridge |
| <input type="checkbox"/> Bahrs Scrub          | <input type="checkbox"/> Edens Landing  | <input type="checkbox"/> Lyons                   | <input type="checkbox"/> Slacks Creek     |
| <input type="checkbox"/> Bannockburn          | <input type="checkbox"/> Flagstone      | <input type="checkbox"/> Maclean (North & South) | <input type="checkbox"/> Springwood       |
| <input type="checkbox"/> Beenleigh            | <input type="checkbox"/> Flinders Lakes | <input type="checkbox"/> Marsden                 | <input type="checkbox"/> Stockleigh       |
| <input type="checkbox"/> Belivah              | <input type="checkbox"/> Forestdale     | <input type="checkbox"/> Meadowbrook             | <input type="checkbox"/> Tamborine        |
| <input type="checkbox"/> Berrinba             | <input type="checkbox"/> Glenlogan      | <input type="checkbox"/> Monarch Glen            | <input type="checkbox"/> Tanah Merah      |
| <input type="checkbox"/> Bethania             | <input type="checkbox"/> Greenbank      | <input type="checkbox"/> Mount Warren Park       | <input type="checkbox"/> Underwood        |
| <input type="checkbox"/> Boronia Heights      | <input type="checkbox"/> Heritage Park  | <input type="checkbox"/> Mundoolun               | <input type="checkbox"/> Undullah         |
| <input type="checkbox"/> Browns Plains        | <input type="checkbox"/> Hillcrest      | <input type="checkbox"/> Munruben                | <input type="checkbox"/> Veresdale        |
| <input type="checkbox"/> Buccan               | <input type="checkbox"/> Holmview       | <input type="checkbox"/> New Beith               | <input type="checkbox"/> Veresdale Scrub  |
| <input type="checkbox"/> Carbrook             | <input type="checkbox"/> Jimboomba      | <input type="checkbox"/> Park Ridge              | <input type="checkbox"/> Waterford        |
| <input type="checkbox"/> Cedar Creek          | <input type="checkbox"/> Kagaru         | <input type="checkbox"/> Park Ridge South        | <input type="checkbox"/> Waterford West   |
| <input type="checkbox"/> Cedar Grove          | <input type="checkbox"/> Kairabah       | <input type="checkbox"/> Priestdale              | <input type="checkbox"/> Windaroo         |
| <input type="checkbox"/> Cedar Vale           | <input type="checkbox"/> Kingston       | <input type="checkbox"/> Regents Park            | <input type="checkbox"/> Wolffdene        |
| <input type="checkbox"/> Chambers Flat        | <input type="checkbox"/> Logan Central  | <input type="checkbox"/> Riverbend               | <input type="checkbox"/> Woodhill         |
| <input type="checkbox"/> Cornubia             | <input type="checkbox"/> Logan Reserve  | <input type="checkbox"/> Rochedale South         | <input type="checkbox"/> Woodridge        |
| <input type="checkbox"/> Crestmead            | <input type="checkbox"/> Logan Village  | <input type="checkbox"/> Shailer Park            | <input type="checkbox"/> Yarrabilba       |
| <input type="checkbox"/> Daisy Hill           | <input type="checkbox"/> Loganholme     |  |   |

## When looking at location options for your activity, please specify the following: \*

- ☐ I can deliver this activity in a Council park  
☐ I can deliver this activity in a community centre or facility  
☐ Other:

## Do you have any specific venue/location requirements for the delivery of your activity?

## Activity Costs

### Participant Fees

A small fee can be charged to participants at each activity. These participant fees are collected and retained by you, as the provider. If you'd prefer not to accept money from participants the activity can be listed as 'free'.

Please consider the benefits to the community of providing a free or low-cost class and choose the smallest participant fee possible to help reduce barriers to participation.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

It is important to note, \$5 per person is the maximum amount that can be charged to participants.

**What will the cost be for participants to attend your activity? \***

- ☐ Free (no cost)
- ☐ \$1
- ☐ \$2
- ☐ \$3
- ☐ \$4
- ☐ \$5

**Please explain why the activity costs differ: \***

**Service Provider Funding**

Service provider funding of up to \$60 per hour is available for activities delivered in the Active and Healthy program. More detailed information about the [program funding, including FAQ's, can be found here](#).

Value for money is an important consideration when programming Active and Healthy activities. Please consider the potential funds obtained by collecting Active participant fees for your activity, and what hourly service provider rate you require to deliver your activity.

Please be advised that the provider fee paid is reflective of the activity delivery time. For example, you may opt to be paid \$40/hour, but only deliver a 30 minute activity. You would therefore receive a \$20 service provider fee for the 30 minute activity.

**What hourly service provider rate would you need to be reimbursed in order to successfully deliver your activity: \***

- ☐ \$20/hour
- ☐ \$30/hour
- ☐ \$40/hour
- ☐ \$50/hour
- ☐ \$60/hour

\$60 per hour is the maximum service provider fee available

**Please provide a justification for the rate you have requested:**

Ensure you consider value for money and the funds collected from participant fees when deciding an hourly service provider rate.

**Do you require payment of the Allied Health subsidy (an additional \$10/hr for your activity in addition to your service provider fee) in order to deliver your activity? \***

- ☐ Yes
- ☐ No

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

## Cooking Class - Cost Breakdown

To enable the delivery of cooking workshops, additional funding may be provided for consumables associated with your cooking class delivery. Items that may be funded include cooking ingredients, pantry essentials and consumable items including things such as paper towel and alfoil.

Please provide a detailed cost breakdown of any expenses you are requesting to be funded. Please ensure this cost breakdown is for one cooking class session. **Please do not include in-kind expenses in this cost breakdown.**

Please note, you may be required to show proof of consumable costs if your application progresses.

Expenses	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

## Venue Hire Costs

What is the hourly rate to hire the venue?

\$

Must be a dollar amount.  
Please be aware that you may be required to provide a quote for venue hire costs if your application is successful.

## Pool Hire - Cost Breakdown

To enable the delivery of activities requiring the use of a pool, additional funding may be provided to cover pool hire costs.

**Please provide a detailed cost breakdown of any expenses you are requesting to be funded. Please ensure this cost breakdown is reflective of the costs for one activity session (e.g. 1 hour class). Please do not include in-kind expenses in this cost breakdown.**

Please note, you may be required to show proof of pool hire costs if your application progresses.

Expenses	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

	\$
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## Access and Inclusion

Logan City Council are committed to ensuring that people of all abilities and backgrounds are able to fulfil their potential in the City of Logan.

Providers are expected to ensure activities are accessible and inclusive wherever possible.

### How will you ensure this activity is accessible and inclusive of the wider Logan community? \*

Word count:

This includes accessible classes for those with disability (visible and non-visible), and inclusive of those from diverse cultural backgrounds and our First Nations People.

## Booking Information

Activity contact information will be displayed to the general public for successful providers in the Active and Healthy booklet and as part of the wider marketing campaign. The information provided will consist of:

- trading name
- contact number
- email address
- booking webpage link (if relevant)

It is recommended you provide both a phone number and email address, however, if you would only like to provide one form of contact, please specify this below.

This contact information will be provided for all activities, despite whether or not bookings are required.

If bookings are required, please indicate below so we can ensure this is specified with your activity details.

### Are bookings required for your activity? \*

- ☐ Yes  
☐ No

If bookings are not required, it is assumed that participants can show up on the day and partake in the activity

### Please provide the email address for general public information and bookings:

Must be an email address.

### Please provide the phone number for general public information and bookings:

Must be an Australian phone number.



# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**If participants are able to book via a website, please provide a link:**

Must be a URL.

**Are participants required to bring anything to the activity? If so, please specify: \***

## Activity Promotion

If successful, we will promote your activity in our Active and Healthy booklet and as part of our wider marketing campaign.

However, as the provider, you are ultimately responsible for the promotion and success of your individual activity/s. Activities which consistently have low or no attendance after a three month period may be removed from the program.

**What steps will you take to promote this activity to ensure success? \***

## Other Activity Information

**If there is any information about your activity that hasn't been covered above, please outline here:**

**Would you like to apply for another activity? \***

- ☐ Yes  
☐ No

## Proposed Activity Information - Activity 5

\* indicates a required field

### Activity Outline

**What is the name of your activity? \***

Note: Activity name may be changed if successful.

**Please describe your activity: \***

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

Word count:

Must be at least 20 words.

This description will be used to promote your activity if successful.

**Would you describe this activity as gentle/low intensity - suitable for seniors, expectant mothers or those with injury? \***

- ☐ Yes
- ☐ No
- ☐ Not applicable

**What are the benefits of this activity for Logan residents?**

Word count:

Must be at least 20 words.

Why is this activity needed in Logan?

**Which category does this activity best align with? \***

- ☐ Fitness
- ☐ Health and wellbeing
- ☐ Sport, recreation and outdoors
- ☐ Stretch and move

Activities may be suitable for multiple categories, however, please choose which category is most reflective of this activity.

**Is this activity a cooking, art or gardening class? \***

- ☐ Yes
- ☐ No

## Activity Delivery

In the latest annual program survey, respondents indicated their preference to attend activities in the afternoon, outside of work hours and on weekends. Council will preference activities that meet the needs of our community. Please keep this in mind when completing this part of the application.

**What format is this activity delivered in? \***

- ☐ In person
- ☐ Online

**Is this activity for a particular age group? \***

- ☐ Yes
- ☐ No (all ages)

E.g. children, over 50's, youth (12-17 years)

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**Please specify what age group this activity is for? \***

**Is there a minimum or maximum age that can attend? \***

E.g. participants may need to be a minimum of 12 years of age to take part safely.

**What is the maximum number of participants that can attend each session?**

Must be a number.  
Please keep in mind venue capacity and safe ratio of participants to facilitator.

**How long will this activity run per session? \***

The length of time your activity will take to be delivered e.g. 1 hour.

**What is your preferred time of day to deliver this activity? \***

Please indicate an idea of time e.g. 9am or if flexible: mid-morning.

**Would you be able to deliver this activity outside of standard business hours? \***

- ☐ Yes, before 9am
- ☐ Yes, after 5pm
- ☐ Available on weekends
- ☐ No, unable to deliver outside of business hours
- ☐ Other:

Please select all that apply.

**How often will this activity be delivered? \***

E.g. Is your activity a one-off cooking workshop or a weekly bootcamp activity that occurs every Thursday?

**What day/s of the week would you be able to deliver this activity? \***

☐ Mondays ☐ Tuesdays ☐ Wednesdays ☐ Thursdays ☐ Fridays ☐ Saturdays ☐ Sundays

Please select all that apply.

**Will this activity be delivered during the school holidays? \***

☐ Yes ☐ No

Providers are able to decide if their activity will continue to be delivered during school holidays.

**What date/s will this activity be delivered? \***

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

Please outline specific activity date/s between 1 July 2023 and 30 June 2024.

**Please specify: \***

Please outline when your activity would be delivered.

**Is this activity already being delivered in the community? \***

- ☐ Yes ☐ No

**Is the activity already being delivered happening at the same day, time and location as requested above in your application? \***

- ☐ Yes ☐ No

**Does the existing activity currently receive funding for delivery? \***

- ☐ Yes ☐ No

**Please provide more information as to why this existing activity requires Active and Healthy funding: \***

## Cooking Class Delivery

If you are delivering a cooking or nutrition class, it is important for us to understand more about your classes and what is involved in their delivery.

Please note that cooking class messaging should align with the [Australian Dietary Guidelines](#).

**Please describe what is involved in the delivery of your sessions, including set up and delivery: \***

Please ensure you describe the set-up, menu/recipes, preparation time etc.

**If you are delivering a cooking class, how will your activity be delivered? \***

- ☐ Demonstration  
☐ Group activity (shared cooking)  
☐ Hands-on class (each participant cooks their own meal)

**Please upload a sample menu (optional):**

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

Attach a file:

This will assist in providing us with a better understanding of your activity.

## Qualifications

**Are you delivering this activity as an Allied Health Professional? \***

- ☐ Yes  
☐ No

**What experience or qualifications do you have to deliver this activity? \***

**Please attach a copy of your relevant qualifications for this activity (if relevant)**

Attach a file:

**How does your qualification as an Allied Health Professional assist in the facilitation of this activity? \***

**Please upload a copy of your allied health qualifications: \***

Attach a file:

## Activity Location

The Active and Healthy program is a Logan City Council funded program. The program gives preference to the use of our [parks](#) and community facilities. Activities delivered in a [Council Community Centre](#) or community facility may be eligible to have venue hire costs reimbursed if a [Council park](#) is not a suitable option for activity delivery. **It is important to note that no venue hire will be paid for activities delivered in your place of business.**

Activities must be delivered within the City of Logan. A map of Logan City can be found [here](#).

Locations may be negotiated with you to ensure an even spread of activities across the City. The more flexible you are with activity locations, the better.

Activity delivery locations and any associated venue hire costs will be negotiated with the Community Programming Officer. If you are requesting venue hire, you may be required to provide proof of venue hire costs if your application progresses.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**Please note, it is solely your responsibility to make all relevant bookings in local parks and venues, should you be successful and this will be communicated to you on successful application.**

**Do you have a park, community centre, or venue in mind to deliver this activity? \***

- ☐ Yes  
☐ No

**What is the name of the park/venue? \***

**What is the address of the park/venue? \***

Address

  

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

**Have you checked if this park/venue is available and suitable for your proposed activity? \***

- ☐ Yes ☐ No

You will be responsible for all aspects of organising this location/venue including payment and bookings, if your activity is successful.

**Is venue hire applicable? (Please don't include pool hire here) \***

- ☐ Yes ☐ No

Please note: there are no venue hire costs associated with delivery of an activity at a Council park.

**Are there pool hire costs to deliver this activity? \***

- ☐ Yes ☐ No

**Would you be willing to deliver this activity in an alternative location/venue? If so, please select all that apply: \***

- ☐ Yes, I can deliver this activity in a Council park  
☐ Yes, I can deliver this activity in a community centre or facility  
☐ No, the delivery location of this activity is not flexible  
☐ Other:

**What suburbs of Logan are you willing to service? \***

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> All suburbs in Logan | <input type="checkbox"/> Eagleby        | <input type="checkbox"/> Loganlea                | <input type="checkbox"/> Silverbark Ridge |
| <input type="checkbox"/> Bahrs Scrub          | <input type="checkbox"/> Edens Landing  | <input type="checkbox"/> Lyons                   | <input type="checkbox"/> Slacks Creek     |
| <input type="checkbox"/> Bannockburn          | <input type="checkbox"/> Flagstone      | <input type="checkbox"/> Maclean (North & South) | <input type="checkbox"/> Springwood       |
| <input type="checkbox"/> Beenleigh            | <input type="checkbox"/> Flinders Lakes | <input type="checkbox"/> Marsden                 | <input type="checkbox"/> Stockleigh       |
| <input type="checkbox"/> Belivah              | <input type="checkbox"/> Forestdale     | <input type="checkbox"/> Meadowbrook             | <input type="checkbox"/> Tamborine        |
| <input type="checkbox"/> Berrinba             | <input type="checkbox"/> Glenlogan      | <input type="checkbox"/> Monarch Glen            | <input type="checkbox"/> Tanah Merah      |
| <input type="checkbox"/> Bethania             | <input type="checkbox"/> Greenbank      | <input type="checkbox"/> Mount Warren Park       | <input type="checkbox"/> Underwood        |
| <input type="checkbox"/> Boronia Heights      | <input type="checkbox"/> Heritage Park  | <input type="checkbox"/> Mundoolun               | <input type="checkbox"/> Undullah         |

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> Browns Plains | <input type="checkbox"/> Hillcrest     | <input type="checkbox"/> Munruben         | <input type="checkbox"/> Veresdale       |
| <input type="checkbox"/> Buccan        | <input type="checkbox"/> Holmview      | <input type="checkbox"/> New Beith        | <input type="checkbox"/> Veresdale Scrub |
| <input type="checkbox"/> Carbrook      | <input type="checkbox"/> Jimboomba     | <input type="checkbox"/> Park Ridge       | <input type="checkbox"/> Waterford       |
| <input type="checkbox"/> Cedar Creek   | <input type="checkbox"/> Kagaru        | <input type="checkbox"/> Park Ridge South | <input type="checkbox"/> Waterford West  |
| <input type="checkbox"/> Cedar Grove   | <input type="checkbox"/> Kairabah      | <input type="checkbox"/> Priestdale       | <input type="checkbox"/> Windaroo        |
| <input type="checkbox"/> Cedar Vale    | <input type="checkbox"/> Kingston      | <input type="checkbox"/> Regents Park     | <input type="checkbox"/> Wolffdene       |
| <input type="checkbox"/> Chambers Flat | <input type="checkbox"/> Logan Central | <input type="checkbox"/> Riverbend        | <input type="checkbox"/> Woodhill        |
| <input type="checkbox"/> Cornubia      | <input type="checkbox"/> Logan Reserve | <input type="checkbox"/> Rochedale South  | <input type="checkbox"/> Woodridge       |
| <input type="checkbox"/> Crestmead     | <input type="checkbox"/> Logan Village | <input type="checkbox"/> Shailer Park     | <input type="checkbox"/> Yarrabilba      |
| <input type="checkbox"/> Daisy Hill    | <input type="checkbox"/> Loganholme    |   |  |

**When looking at location options for your activity, please specify the following: \***

- ☐ I can deliver this activity in a Council park
- ☐ I can deliver this activity in a community centre or facility
- ☐ Other:

**Do you have any specific venue/location requirements for the delivery of your activity?**

## Activity Costs

### Participant Fees

A small fee can be charged to participants at each activity. These participant fees are collected and retained by you, as the provider. If you'd prefer not to accept money from participants the activity can be listed as 'free'.

Please consider the benefits to the community of providing a free or low-cost class and choose the smallest participant fee possible to help reduce barriers to participation.

It is important to note, \$5 per person is the maximum amount that can be charged to participants.

**What will the cost be for participants to attend your activity? \***

- ☐ Free (no cost)
- ☐ \$1
- ☐ \$2
- ☐ \$3
- ☐ \$4
- ☐ \$5

**Please explain why the activity costs differ: \***

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

## Service Provider Funding

Service provider funding of up to \$60 per hour is available for activities delivered in the Active and Healthy program. More detailed information about the [program funding, including FAQ's, can be found here](#).

Value for money is an important consideration when programming Active and Healthy activities. Please consider the potential funds obtained by collecting participant fees for your activity, and what hourly service provider rate you require to deliver your activity.

Please be advised that the provider fee paid is reflective of the activity delivery time. For example, you may opt to be paid \$40/hour, but only deliver a 30 minute activity. You would therefore receive a \$20 service provider fee for the 30 minute activity.

**What hourly service provider rate would you need to be reimbursed in order to successfully deliver your activity: \***

- ☐ \$20/hour
- ☐ \$30/hour
- ☐ \$40/hour
- ☐ \$50/hour
- ☐ \$60/hour

\$60 per hour is the maximum service provider fee available

**Please provide a justification for the rate you have requested:**

Ensure you consider value for money and the funds collected from participant fees when deciding an hourly service provider rate.

**Do you require payment of the Allied Health subsidy (an additional \$10/hr for your activity in addition to your service provider fee) in order to deliver your activity? \***

- ☐ Yes
- ☐ No

## Cooking Class - Cost Breakdown

To enable the delivery of cooking workshops, additional funding may be provided for consumables associated with your cooking class delivery. Items that may be funded include cooking ingredients, pantry essentials and consumable items including things such as paper towel and foil.

Please provide a detailed cost breakdown of any expenses you are requesting to be funded. Please ensure this cost breakdown is for one cooking class session. **Please do not include in-kind expenses in this cost breakdown.**

Please note, you may be required to show proof of consumable costs if your application progresses.

Expenses	\$
	\$
	\$
	\$



# Active & Healthy Program 2024/2025 - Request for Proposal

## Form Preview

	\$
	\$
	\$
	\$
	\$

### Venue Hire Costs

**What is the hourly rate to hire the venue?**

\$

Must be a dollar amount.

Please be aware that you may be required to provide a quote for venue hire costs if your application is successful.

### Pool Hire - Cost Breakdown

To enable the delivery of activities requiring the use of a pool, additional funding may be provided to cover pool hire costs.

**Please provide a detailed cost breakdown of any expenses you are requesting to be funded. Please ensure this cost breakdown is reflective of the costs for one activity session (e.g. 1 hour class). Please do not include in-kind expenses in this cost breakdown.**

Please note, you may be required to show proof of pool hire costs if your application progresses.

Expenses	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

### Access and Inclusion

Logan City Council are committed to ensuring that people of all abilities and backgrounds are able to fulfil their potential in the City of Logan.

Providers are expected to ensure activities are accessible and inclusive wherever possible.

**How will you ensure this activity is accessible and inclusive of the wider Logan community? \***

Word count:  
Must be at least 20 words.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

This includes accessible classes for those with disability (visible and non-visible), and inclusive of those from diverse cultural backgrounds and our First Nations People.

## Booking Information

Activity contact information will be displayed to the general public for successful providers in the Active and Healthy booklet and as part of the wider marketing campaign. The information provided will consist of:

- trading name
- contact number
- email address
- booking webpage link (if relevant)

It is recommended you provide both a phone number and email address, however, if you would only like to provide one form of contact, please specify this below.

This contact information will be provided for all activities, whether or not bookings are required.

If bookings are required, please indicate below so we can ensure this is specified with your activity details.

### **Are bookings required for your activity? \***

- ☐ Yes  
☐ No

If bookings are not required, it is assumed that participants can show up on the day and partake in the activity

### **Please provide the email address for general public information and bookings:**

Must be an email address.

### **Please provide the phone number for general public information and bookings:**

Must be an Australian phone number.

### **If participants are able to book via a website, please provide a link:**

Must be a URL.

### **Are participants required to bring anything to the activity? If so, please specify: \***

## Activity Promotion

If successful, we will promote your activity in our Active and Healthy booklet and as part of our wider marketing campaign.

However, as the provider, you are ultimately responsible for the promotion and success of your individual activity/s. Activities which consistently have low or no attendance after a three month period may be removed from the program.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**What steps will you take to promote this activity to ensure success? \***

## Other Activity Information

**If there is any information about your activity that hasn't been covered above, please outline here:**

**Would you like to apply for another activity? \***

- ☐ Yes  
☐ No

## Proposed Activity Information - Activity 6

**\* indicates a required field**

### Activity Outline

**What is the name of your activity? \***

Note: Activity name may be changed if successful.

**Please describe your activity: \***

Word count:

Must be at least 20 words.

This description will be used to promote your activity if successful.

**Would you describe this activity as gentle/low intensity - suitable for seniors, expectant mothers or those with injury? \***

- ☐ Yes  
☐ No  
☐ Not applicable

**What are the benefits of this activity for Logan residents? \***

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

Word count:

Must be at least 20 words.

Why is this activity needed in Logan?

**Which category does this activity best align with? \***

- ☐ Fitness
- ☐ Health and wellbeing
- ☐ Sport, recreation and outdoors
- ☐ Stretch and move

Activities may be suitable for multiple categories, however, please choose which category is most reflective of this activity.

**Is this activity a cooking, art or gardening class? \***

- ☐ Yes
- ☐ No

## Activity Delivery

In the latest annual program survey, respondents indicated their preference to attend activities in the afternoon, outside of work hours and on weekends. Council will preference activities that meet the needs of our community. Please keep this in mind when completing this part of the application.

**What format is this activity delivered in? \***

- ☐ In person
- ☐ Online

**Is this activity for a particular age group? \***

- ☐ Yes
- ☐ No (all ages)

E.g. children, over 50's, youth (12-17 years)

**Please specify what age group this activity is for? \***

**Is there a minimum or maximum age that can attend? \***

E.g. participants may need to be a minimum of 12 years of age to take part safely.

**What is the maximum number of participants that can attend each session? \***

Must be a number.  
Please keep in mind venue capacity and safe ratio of participants to facilitator.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**How long will this activity run per session? \***

The length of time your activity will take to be delivered e.g. 1 hour.

**What is your preferred time of day to deliver this activity? \***

Please indicate an idea of time e.g. 9am or if flexible: mid-morning.

**Would you be able to deliver this activity outside of standard business hours? \***

- ☐ Yes, before 9am  
☐ Yes, after 5pm  
☐ Available on weekends  
☐ No, unable to deliver outside of business hours  
☐ Other:

Please select all that apply.

**How often will this activity be delivered? \***

E.g. Is your activity a one-off cooking workshop or a weekly bootcamp activity that occurs every Thursday?

**What day/s of the week would you be able to deliver this activity? \***

☐ Mondays ☐ Tuesdays ☐ Wednesdays ☐ Thursdays ☐ Fridays ☐ Saturdays ☐ Sundays

Please select all that apply.

**Will this activity be delivered during the school holidays? \***

☐ Yes ☐ No

Providers are able to decide if their activity will continue to be delivered during school holidays.

**What date/s will this activity be delivered? \***

Please outline specific activity date/s between 1 July 2023 and 30 June 2024.

**Please specify: \***

Please outline when your activity would be delivered.

**Is this activity already being delivered in the community? \***

☐ Yes ☐ No

**Is the activity already being delivered happening at the same day, time and location as requested above in your application? \***

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

☐ Yes

☐ No

**Does the existing activity currently receive funding for delivery? \***

☐ Yes

☐ No

**Please provide more information as to why this existing activity requires Active and Healthy funding: \***

## Cooking Class Delivery

If you are delivering a cooking or nutrition class, it is important for us to understand more about your classes and what is involved in their delivery.

Please note that cooking class messaging should align with the [Australian Dietary Guidelines](#).

**Please describe what is involved in the delivery of your sessions, including set up and delivery: \***

Please ensure you describe the set-up, menu/recipes, preparation time etc.

**If you are delivering a cooking class, how will your activity be delivered? \***

☐ Demonstration

☐ Group activity (shared cooking)

☐ Hands-on class (each participant cooks their own meal)

**Please upload a sample menu (optional):**

Attach a file:

This will assist in providing us with a better understanding of your activity.

## Qualifications

**Are you delivering this activity as an Allied Health Professional? \***

☐ Yes

☐ No

**What experience or qualifications do you have to deliver this activity? \***

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**Please attach a copy of your relevant qualifications for this activity (if relevant)**

Attach a file:

**How does your qualification as an Allied Health Professional assist in the facilitation of this activity? \***

**Please upload a copy of your allied health qualifications: \***

Attach a file:

## Activity Location

The Active and Healthy program is a Logan City Council funded program. The program gives preference to the use of our [parks](#) and community facilities. Activities delivered in a [Council Community Centre](#) or community facility may be eligible to have venue hire costs reimbursed if a [Council park](#) is not a suitable option for activity delivery. **It is important to note that no venue hire will be paid for activities delivered in your place of business.**

Activities must be delivered within the City of Logan. A map of Logan City can be found [here](#).

Locations may be negotiated with you to ensure an even spread of activities across the City. The more flexible you are with activity locations, the better.

Activity delivery locations and any associated venue hire costs will be negotiated with the Community Programming Officer. If you are requesting venue hire, you may be required to provide proof of venue hire costs if your application progresses.

**Please note, it is solely your responsibility to make all relevant bookings in local parks and venues, should you be successful and this will be communicated to you on successful application.**

**Do you have a park, community centre, or venue in mind to deliver this activity? \***

- ☐ Yes  
☐ No

**What is the name of the park/venue? \***

**What is the address of the park/venue? \***

Address

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**Have you checked if this park/venue is available and suitable for your proposed activity? \***

☐ Yes

☐ No

You will be responsible for all aspects of organising this location/venue including payment and bookings, if your activity is successful.

**Is venue hire applicable? (Please don't include pool hire here) \***

☐ Yes

☐ No

Please note: there are no venue hire costs associated with delivery of an activity at a Council park.

**Are there pool hire costs to deliver this activity? \***

☐ Yes

☐ No

**Would you be willing to deliver this activity in an alternative location/venue? If so, please select all that apply: \***

- ☐ Yes, I can deliver this activity in a Council park
- ☐ Yes, I can deliver this activity in a community centre or facility
- ☐ No, the delivery location of this activity is not flexible
- ☐ Other:

**What suburbs of Logan are you willing to service? \***

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> All suburbs in Logan | <input type="checkbox"/> Eagleby        | <input type="checkbox"/> Loganlea                | <input type="checkbox"/> Silverbark Ridge |
| <input type="checkbox"/> Bahrs Scrub          | <input type="checkbox"/> Edens Landing  | <input type="checkbox"/> Lyons                   | <input type="checkbox"/> Slacks Creek     |
| <input type="checkbox"/> Bannockburn          | <input type="checkbox"/> Flagstone      | <input type="checkbox"/> Maclean (North & South) | <input type="checkbox"/> Springwood       |
| <input type="checkbox"/> Beenleigh            | <input type="checkbox"/> Flinders Lakes | <input type="checkbox"/> Marsden                 | <input type="checkbox"/> Stockleigh       |
| <input type="checkbox"/> Belivah              | <input type="checkbox"/> Forestdale     | <input type="checkbox"/> Meadowbrook             | <input type="checkbox"/> Tamborine        |
| <input type="checkbox"/> Berrinba             | <input type="checkbox"/> Glenlogan      | <input type="checkbox"/> Monarch Glen            | <input type="checkbox"/> Tanah Merah      |
| <input type="checkbox"/> Bethania             | <input type="checkbox"/> Greenbank      | <input type="checkbox"/> Mount Warren Park       | <input type="checkbox"/> Underwood        |
| <input type="checkbox"/> Boronia Heights      | <input type="checkbox"/> Heritage Park  | <input type="checkbox"/> Mundoolun               | <input type="checkbox"/> Undullah         |
| <input type="checkbox"/> Browns Plains        | <input type="checkbox"/> Hillcrest      | <input type="checkbox"/> Munruben                | <input type="checkbox"/> Veresdale        |
| <input type="checkbox"/> Buccan               | <input type="checkbox"/> Holmview       | <input type="checkbox"/> New Beith               | <input type="checkbox"/> Veresdale Scrub  |
| <input type="checkbox"/> Carbrook             | <input type="checkbox"/> Jimboomba      | <input type="checkbox"/> Park Ridge              | <input type="checkbox"/> Waterford        |
| <input type="checkbox"/> Cedar Creek          | <input type="checkbox"/> Kagaru         | <input type="checkbox"/> Park Ridge South        | <input type="checkbox"/> Waterford West   |
| <input type="checkbox"/> Cedar Grove          | <input type="checkbox"/> Kairabah       | <input type="checkbox"/> Priestdale              | <input type="checkbox"/> Windaroo         |
| <input type="checkbox"/> Cedar Vale           | <input type="checkbox"/> Kingston       | <input type="checkbox"/> Regents Park            | <input type="checkbox"/> Wolffdene        |
| <input type="checkbox"/> Chambers Flat        | <input type="checkbox"/> Logan Central  | <input type="checkbox"/> Riverbend               | <input type="checkbox"/> Woodhill         |
| <input type="checkbox"/> Cornubia             | <input type="checkbox"/> Logan Reserve  | <input type="checkbox"/> Rochedale South         | <input type="checkbox"/> Woodridge        |
| <input type="checkbox"/> Crestmead            | <input type="checkbox"/> Logan Village  | <input type="checkbox"/> Shailer Park            | <input type="checkbox"/> Yarrabilba       |
| <input type="checkbox"/> Daisy Hill           | <input type="checkbox"/> Loganholme     |  |   |

**When looking at location options for your activity, please specify the following: \***

- ☐ I can deliver this activity in a Council park
- ☐ I can deliver this activity in a community centre or facility
- ☐ Other:



# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**Do you have any specific venue/location requirements for the delivery of your activity?**

## Activity Costs

### Participant Fees

A small fee can be charged to participants at each activity. These participant fees are collected and retained by you, as the provider. If you'd prefer not to accept money from participants the activity can be listed as 'free'.

Please consider the benefits to the community of providing a free or low-cost class and choose the smallest participant fee possible to help reduce barriers to participation.

It is important to note, \$5 per person is the maximum amount that can be charged to participants.

**What will the cost be for participants to attend your activity? \***

- ☐ Free (no cost)
- ☐ \$1
- ☐ \$2
- ☐ \$3
- ☐ \$4
- ☐ \$5

**Please explain why the activity costs differ: \***

### Service Provider Funding

Service provider funding of up to \$60 per hour is available for activities delivered in the Active and Healthy program. More detailed information about the [program funding, including FAQ's, can be found here](#).

Value for money is an important consideration when programming Active and Healthy activities. Please consider the potential funds obtained by collecting participant fees for your activity, and what hourly service provider rate you require to deliver your activity.

Please be advised that the provider fee paid is reflective of the activity delivery time. For example, you may opt to be paid \$40/hour, but only deliver a 30 minute activity. You would therefore receive a \$20 service provider fee for the 30 minute activity.

**What hourly service provider rate would you need to be reimbursed in order to successfully deliver your activity: \***

- ☐ \$20/hour
- ☐ \$30/hour
- ☐ \$40/hour
- ☐ \$50/hour

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

☐ \$60/hour  
\$60 per hour is the maximum service provider fee available

**Please provide a justification for the rate you have requested:**

Ensure you consider value for money and the funds collected from participant fees when deciding an hourly service provider rate.

**Do you require payment of the Allied Health subsidy (an additional \$10/hr for your activity in addition to your service provider fee) in order to deliver your activity? \***

- ☐ Yes  
☐ No

### Cooking Class - Cost Breakdown

To enable the delivery of cooking workshops, additional funding may be provided for consumables associated with your cooking class delivery. Items that may be funded include cooking ingredients, pantry essentials and consumable items including things such as paper towel and foil.

Please provide a detailed cost breakdown of any expenses you are requesting to be funded. Please ensure this cost breakdown is for one cooking class session. **Please do not include in-kind expenses in this cost breakdown.**

Please note, you may be required to show proof of consumable costs if your application progresses.

Expenses	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

### Venue Hire Costs

**What is the hourly rate to hire the venue?**

\$

Must be a dollar amount.  
Please be aware that you may be required to provide a quote for venue hire costs if your application is successful.

### Pool Hire - Cost Breakdown

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

To enable the delivery of activities requiring the use of a pool, additional funding may be provided to cover pool hire costs.

**Please provide a detailed cost breakdown of any expenses you are requesting to be funded. Please ensure this cost breakdown is reflective of the costs for one activity session (e.g. 1 hour class). Please do not include in-kind expenses in this cost breakdown.**

Please note, you may be required to show proof of pool hire costs if your application progresses.

Expenses	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

## Access and Inclusion

Logan City Council are committed to ensuring that people of all abilities and backgrounds are able to fulfil their potential in the City of Logan.

Providers are expected to ensure activities are accessible and inclusive wherever possible.

**How will you ensure this activity is accessible and inclusive of the wider Logan community?**

This includes accessible classes for those with disability (visible and non-visible), and inclusive of those from diverse cultural backgrounds and our First Nations People.

## Booking Information

Activity contact information will be displayed to the general public for successful providers in the Active and Healthy booklet and as part of the wider marketing campaign. The information provided will consist of:

- trading name
- contact number
- email address
- booking webpage link (if relevant)

It is recommended you provide both a phone number and email address, however, if you would only like to provide one form of contact, please specify this below.

This contact information will be provided for all activities, whether or not bookings are required.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

If bookings are required, please indicate below so we can ensure this is specified with your activity details.

**Are bookings required for your activity? \***

- ☐ Yes  
☐ No

If bookings are not required, it is assumed that participants can show up on the day and partake in the activity

**Please provide the email address for general public information and bookings:**

Must be an email address.

**Please provide the phone number for general public information and bookings:**

Must be an Australian phone number.

**If participants are able to book via a website, please provide a link:**

Must be a URL.

**Are participants required to bring anything to the activity? If so, please specify: \***

## Activity Promotion

If successful, we will promote your activity in our Active and Healthy booklet and as part of our wider marketing campaign.

However, as the provider, you are ultimately responsible for the promotion and success of your individual activity/s. Activities which consistently have low or no attendance after a three month period may be removed from the program.

**What steps will you take to promote this activity to ensure success? \***

## Other Activity Information

**If there is any information about your activity that hasn't been covered above, please outline here:**

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**Would you like to apply for another activity? \***

- ☐ Yes
- ☐ No

## Proposed Activity Information - Activity 7

**\* indicates a required field**

### Activity Outline

**What is the name of your activity? \***

Note: Activity name may be changed if successful.

**Please describe your activity: \***

Word count:

Must be at least 20 words.

This description will be used to promote your activity if successful.

**Would you describe this activity as gentle/low intensity - suitable for seniors, expectant mothers or those with injury? \***

- ☐ Yes
- ☐ No
- ☐ Not applicable

**What are the benefits of this activity for Logan residents? \***

Word count:

Must be at least 20 words.

Why is this activity needed in Logan?

**Which category does this activity best align with? \***

- ☐ Fitness
- ☐ Health and wellbeing
- ☐ Sport, recreation and outdoors
- ☐ Stretch and move

Activities may be suitable for multiple categories, however, please choose which category is most reflective of this activity.

**Is this activity a cooking, art or gardening class? \***

- ☐ Yes
- ☐ No

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

## Activity Delivery

In the latest annual program survey, respondents indicated their preference to attend activities in the afternoon, outside of work hours and on weekends. Council will preference activities that meet the needs of our community. Please keep this in mind when completing this part of the application.

**What format is this activity delivered in? \***

- ☐ In person ☐ Online

**Is this activity for a particular age group? \***

- ☐ Yes ☐ No (all ages)

E.g. children, over 50's, youth (12-17 years)

**Please specify what age group this activity is for? \***

**Is there a minimum or maximum age that can attend? \***

E.g. participants may need to be a minimum of 12 years of age to take part safely.

**What is the maximum number of participants that can attend each session? \***

Must be a number.  
Please keep in mind venue capacity and safe ratio of participants to facilitator.

**How long will this activity run per session? \***

The length of time your activity will take to be delivered e.g. 1 hour.

**What is your preferred time of day to deliver this activity? \***

Please indicate an idea of time e.g. 9am or if flexible: mid-morning.

**Would you be able to deliver this activity outside of standard business hours? \***

- ☐ Yes, before 9am  
☐ Yes, after 5pm  
☐ Available on weekends  
☐ No, unable to deliver outside of business hours  
☐ Other:

Please select all that apply.

**How often will this activity be delivered? \***

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

E.g. Is your activity a one-off cooking workshop or a weekly bootcamp activity that occurs every Thursday?

**What day/s of the week would you be able to deliver this activity? \***

☐ Mondays ☐ Tuesdays ☐ Wednesdays ☐ Thursdays ☐ Fridays ☐ Saturdays ☐ Sundays

Please select all that apply.

**Will this activity be delivered during the school holidays? \***

☐ Yes ☐ No

Providers are able to decide if their activity will continue to be delivered during school holidays.

**What date/s will this activity be delivered? \***

Please outline specific activity date/s between 1 July 2023 and 30 June 2024.

**Please specify: \***

Please outline when your activity would be delivered.

**Is this activity already being delivered in the community? \***

☐ Yes ☐ No

**Is the activity already being delivered happening at the same day, time and location as requested above in your application? \***

☐ Yes ☐ No

**Does the existing activity currently receive funding for delivery? \***

☐ Yes ☐ No

**Please provide more information as to why this existing activity requires Active and Healthy funding: \***

## Cooking Class Delivery

If you are delivering a cooking or nutrition class, it is important for us to understand more about your classes and what is involved in their delivery.

Please note that cooking class messaging should align with the [Australian Dietary Guidelines](#).

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**Please describe what is involved in the delivery of your sessions, including set up and delivery: \***

Please ensure you describe the set-up, menu/recipes, preparation time etc.

**If you are delivering a cooking class, how will your activity be delivered? \***

- ☐ Demonstration
- ☐ Group activity (shared cooking)
- ☐ Hands-on class (each participant cooks their own meal)

**Please upload a sample menu (optional):**

Attach a file:

This will assist in providing us with a better understanding of your activity.

## Qualifications

**Are you delivering this activity as an Allied Health Professional? \***

- ☐ Yes
- ☐ No

**What experience or qualifications do you have to deliver this activity? \***

**Please attach a copy of your relevant qualifications for this activity (if relevant)**

Attach a file:

**How does your qualification as an Allied Health Professional assist in the facilitation of this activity? \***

**Please upload a copy of your allied health qualifications: \***

Attach a file:

## Activity Location

The Active and Healthy program is a Logan City Council funded program. The program gives preference to the use of our [parks](#) and community facilities. Activities delivered in a [Council Community Centre](#) or community facility may be eligible to have venue hire costs



# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

reimbursed if a [Council park](#) is not a suitable option for activity delivery. **It is important to note that no venue hire will be paid for activities delivered in your place of business.**

Activities must be delivered within the City of Logan. A map of Logan City can be found [here](#).

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Activity delivery locations and any associated venue hire costs will be negotiated with the Community Programming Officer. If you are requesting venue hire, you may be required to provide proof of venue hire costs if your application progresses.

**Please note, it is solely your responsibility to make all relevant bookings in local parks and venues, should you be successful and this will be communicated to you on successful application.**

**Do you have a park, community centre, or venue in mind to deliver this activity? \***

- ☐ Yes  
☐ No

**What is the name of the park/venue? \***

**What is the address of the park/venue? \***

Address

  

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

**Have you checked if this park/venue is available and suitable for your proposed activity? \***

- ☐ Yes ☐ No

You will be responsible for all aspects of organising this location/venue including payment and bookings, if your activity is successful.

**Is venue hire applicable? (Please don't include pool hire here)**

- ☐ Yes ☐ No

Please note: there are no venue hire costs associated with delivery of an activity at a Council park.

**Are there pool hire costs to deliver this activity? \***

- ☐ Yes ☐ No

**Would you be willing to deliver this activity in an alternative location/venue? If so, please select all that apply: \***

- ☐ Yes, I can deliver this activity in a Council park  
☐ Yes, I can deliver this activity in a community centre or facility  
☐ No, the delivery location of this activity is not flexible  
☐ Other:

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

## What suburbs of Logan are you willing to service? \*

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> All suburbs in Logan | <input type="checkbox"/> Eagleby        | <input type="checkbox"/> Loganlea                | <input type="checkbox"/> Silverbark Ridge |
| <input type="checkbox"/> Bahrs Scrub          | <input type="checkbox"/> Edens Landing  | <input type="checkbox"/> Lyons                   | <input type="checkbox"/> Slacks Creek     |
| <input type="checkbox"/> Bannockburn          | <input type="checkbox"/> Flagstone      | <input type="checkbox"/> Maclean (North & South) | <input type="checkbox"/> Springwood       |
| <input type="checkbox"/> Beenleigh            | <input type="checkbox"/> Flinders Lakes | <input type="checkbox"/> Marsden                 | <input type="checkbox"/> Stockleigh       |
| <input type="checkbox"/> Belivah              | <input type="checkbox"/> Forestdale     | <input type="checkbox"/> Meadowbrook             | <input type="checkbox"/> Tamborine        |
| <input type="checkbox"/> Berrinba             | <input type="checkbox"/> Glenlogan      | <input type="checkbox"/> Monarch Glen            | <input type="checkbox"/> Tanah Merah      |
| <input type="checkbox"/> Bethania             | <input type="checkbox"/> Greenbank      | <input type="checkbox"/> Mount Warren Park       | <input type="checkbox"/> Underwood        |
| <input type="checkbox"/> Boronia Heights      | <input type="checkbox"/> Heritage Park  | <input type="checkbox"/> Mundoolun               | <input type="checkbox"/> Undullah         |
| <input type="checkbox"/> Browns Plains        | <input type="checkbox"/> Hillcrest      | <input type="checkbox"/> Munruben                | <input type="checkbox"/> Veresdale        |
| <input type="checkbox"/> Buccan               | <input type="checkbox"/> Holmview       | <input type="checkbox"/> New Beith               | <input type="checkbox"/> Veresdale Scrub  |
| <input type="checkbox"/> Carbrook             | <input type="checkbox"/> Jimboomba      | <input type="checkbox"/> Park Ridge              | <input type="checkbox"/> Waterford        |
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| <input type="checkbox"/> Cedar Vale           | <input type="checkbox"/> Kingston       | <input type="checkbox"/> Regents Park            | <input type="checkbox"/> Wolffdene        |
| <input type="checkbox"/> Chambers Flat        | <input type="checkbox"/> Logan Central  | <input type="checkbox"/> Riverbend               | <input type="checkbox"/> Woodhill         |
| <input type="checkbox"/> Cornubia             | <input type="checkbox"/> Logan Reserve  | <input type="checkbox"/> Rochedale South         | <input type="checkbox"/> Woodridge        |
| <input type="checkbox"/> Crestmead            | <input type="checkbox"/> Logan Village  | <input type="checkbox"/> Shailer Park            | <input type="checkbox"/> Yarrabilba       |
| <input type="checkbox"/> Daisy Hill           | <input type="checkbox"/> Loganholme     |  |   |

## When looking at location options for your activity, please specify the following: \*

- ☐ I can deliver this activity in a Council park
- ☐ I can deliver this activity in a community centre or facility
- ☐ Other:

## Do you have any specific venue/location requirements for the delivery of your activity?

## Activity Costs

### Participant Fees

A small fee can be charged to participants at each activity. These participant fees are collected and retained by you, as the provider. If you'd prefer not to accept money from participants the activity can be listed as 'free'.

Please consider the benefits to the community of providing a free or low-cost class and choose the smallest participant fee possible to help reduce barriers to participation.

It is important to note, \$5 per person is the maximum amount that can be charged to participants.

## What will the cost be for participants to attend your activity? \*

- ☐ Free (no cost)
- ☐ \$1
- ☐ \$2

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

- ☐ \$3
- ☐ \$4
- ☐ \$5

**Please explain why the activity costs differ: \***

## Service Provider Funding

Service provider funding of up to \$60 per hour is available for activities delivered in the Active and Healthy program. More detailed information about the [program funding, including FAQ's, can be found here](#).

Value for money is an important consideration when programming Active and Healthy activities. Please consider the potential funds obtained by collecting participant fees for your activity, and what hourly service provider rate you require to deliver your activity.

Please be advised that the provider fee paid is reflective of the activity delivery time. For example, you may opt to be paid \$40/hour, but only deliver a 30 minute activity. You would therefore receive a \$20 service provider fee for the 30 minute activity.

**What hourly service provider rate would you need to be reimbursed in order to successfully deliver your activity: \***

- ☐ \$20/hour
- ☐ \$30/hour
- ☐ \$40/hour
- ☐ \$50/hour
- ☐ \$60/hour

\$60 per hour is the maximum service provider fee available

**Please provide a justification for the rate you have requested:**

Ensure you consider value for money and the funds collected from participant fees when deciding an hourly service provider rate.

**Do you require payment of the Allied Health subsidy (an additional \$10/hr for your activity in addition to your service provider fee) in order to deliver your activity? \***

- ☐ Yes
- ☐ No

## Cooking Class - Cost Breakdown

To enable the delivery of cooking workshops, additional funding may be provided for consumables associated with your cooking class delivery. Items that may be funded include cooking ingredients, pantry essentials and consumable items including things such as paper towel and foil.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

Please provide a detailed cost breakdown of any expenses you are requesting to be funded. Please ensure this cost breakdown is for one cooking class session. **Please do not include in-kind expenses in this cost breakdown.**

Please note, you may be required to show proof of consumable costs if your application progresses.

Expenses	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

## Venue Hire Costs

What is the hourly rate to hire the venue?

\$

Must be a dollar amount.  
Please be aware that you may be required to provide a quote for venue hire costs if your application is successful.

## Pool Hire - Cost Breakdown

To enable the delivery of activities requiring the use of a pool, additional funding may be provided to cover pool hire costs.

**Please provide a detailed cost breakdown of any expenses you are requesting to be funded. Please ensure this cost breakdown is reflective of the costs for one activity session (e.g. 1 hour class). Please do not include in-kind expenses in this cost breakdown.**

Please note, you may be required to show proof of pool hire costs if your application progresses.

Expenses	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

## Access and Inclusion

Logan City Council are committed to ensuring that people of all abilities and backgrounds are able to fulfil their potential in the City of Logan.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

Providers are expected to ensure activities are accessible and inclusive wherever possible.

## How will you ensure this activity is accessible and inclusive of the wider Logan community? \*

Word count:

Must be at least 20 words.

This includes accessible classes for those with disability (visible and non-visible), and inclusive of those from diverse cultural backgrounds and our First Nations People.

## Booking Information

Activity contact information will be displayed to the general public for successful providers in the Active and Healthy booklet and as part of the wider marketing campaign. The information provided will consist of:

- trading name
- contact number
- email address
- booking webpage link (if relevant)

It is recommended you provide both a phone number and email address, however, if you would only like to provide one form of contact, please specify this below.

This contact information will be provided for all activities, whether or not bookings are required.

If bookings are required, please indicate below so we can ensure this is specified with your activity details.

## Are bookings required for your activity? \*

- ☐ Yes  
☐ No

If bookings are not required, it is assumed that participants can show up on the day and partake in the activity

## Please provide the email address for general public information and bookings:

Must be an email address.

## Please provide the phone number for general public information and bookings:

Must be an Australian phone number.

## If participants are able to book via a website, please provide a link:

Must be a URL.

## Are participants required to bring anything to the activity? If so, please specify: \*

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

## Activity Promotion

If successful, we will promote your activity in our Active and Healthy booklet and as part of our wider marketing campaign.

However, as the provider, you are ultimately responsible for the promotion and success of your individual activity/s. Activities which consistently have low or no attendance after a three month period may be removed from the program.

**What steps will you take to promote this activity to ensure success? \***

## Other Activity Information

**If there is any information about your activity that hasn't been covered above, please outline here:**

**Would you like to apply for another activity? \***

- ☐ Yes  
☐ No

## Proposed Activity Information - Activity 8

**\* indicates a required field**

### Activity Outline

**What is the name of your activity? \***

Note: Activity name may be changed if successful.

**Please describe your activity: \***

Word count:

Must be at least 20 words.

This description will be used to promote your activity if successful.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**Would you describe this activity as gentle/low intensity - suitable for seniors, expectant mothers or those with injury? \***

- ☐ Yes
- ☐ No
- ☐ Not applicable

**What are the benefits of this activity for Logan residents? \***

Word count:

Must be at least 20 words.

Why is this activity needed in Logan?

**Which category does this activity best align with? \***

- ☐ Fitness
- ☐ Health and wellbeing
- ☐ Sport, recreation and outdoors
- ☐ Stretch and move

Activities may be suitable for multiple categories, however, please choose which category is most reflective of this activity.

**Is this activity a cooking, art or gardening class? \***

- ☐ Yes
- ☐ No

## Activity Delivery

In the latest annual program survey, respondents indicated their preference to attend activities in the afternoon, outside of work hours and on weekends. Council will preference activities that meet the needs of our community. Please keep this in mind when completing this part of the application.

**What format is this activity delivered in? \***

- ☐ In person
- ☐ Online

**Is this activity for a particular age group? \***

- ☐ Yes
- ☐ No (all ages)

E.g. children, over 50's, youth (12-17 years)

**Please specify what age group this activity is for? \***

**Is there a minimum or maximum age that can attend? \***

E.g. participants may need to be a minimum of 12 years of age to take part safely.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**What is the maximum number of participants that can attend each session? \***

Must be a number.  
Please keep in mind venue capacity and safe ratio of participants to facilitator.

**How long will this activity run per session? \***

The length of time your activity will take to be delivered e.g. 1 hour.

**What is your preferred time of day to deliver this activity? \***

Please indicate an idea of time e.g. 9am or if flexible: mid-morning.

**Would you be able to deliver this activity outside of standard business hours? \***

- ☐ Yes, before 9am  
☐ Yes, after 5pm  
☐ Available on weekends  
☐ No, unable to deliver outside of business hours  
☐ Other:

Please select all that apply.

**How often will this activity be delivered? \***

E.g. Is your activity a one-off cooking workshop or a weekly bootcamp activity that occurs every Thursday?

**What day/s of the week would you be able to deliver this activity? \***

☐ Mondays ☐ Tuesdays ☐ Wednesdays ☐ Thursdays ☐ Fridays ☐ Saturdays ☐ Sundays

Please select all that apply.

**Will this activity be delivered during the school holidays? \***

☐ Yes ☐ No

Providers are able to decide if their activity will continue to be delivered during school holidays.

**What date/s will this activity be delivered? \***

Please outline specific activity date/s between 1 July 2023 and 30 June 2024.

**Please specify: \***

Please outline when your activity would be delivered.



# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**Is this activity already being delivered in the community? \***

- ☐ Yes ☐ No

**Is the activity already being delivered happening at the same day, time and location as requested above in your application? \***

- ☐ Yes ☐ No

**Does the existing activity currently receive funding for delivery? \***

- ☐ Yes ☐ No

**Please provide more information as to why this existing activity requires Active and Healthy funding: \***

## Cooking Class Delivery

If you are delivering a cooking or nutrition class, it is important for us to understand more about your classes and what is involved in their delivery.

Please note that cooking class messaging should align with the [Australian Dietary Guidelines](#).

**Please describe what is involved in the delivery of your sessions, including set up and delivery: \***

Please ensure you describe the set-up, menu/recipes, preparation time etc.

**If you are delivering a cooking class, how will your activity be delivered? \***

- ☐ Demonstration  
☐ Group activity (shared cooking)  
☐ Hands-on class (each participant cooks their own meal)

**Please upload a sample menu (optional):**

Attach a file:

This will assist in providing us with a better understanding of your activity.

## Qualifications

**Are you delivering this activity as an Allied Health Professional? \***

- ☐ Yes  
☐ No

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**What experience or qualifications do you have to deliver this activity? \***

**Please attach a copy of your relevant qualifications for this activity (if relevant)**

Attach a file:

**How does your qualification as an Allied Health Professional assist in the facilitation of this activity? \***

**Please upload a copy of your allied health qualifications: \***

Attach a file:

## Activity Location

The Active and Healthy program is a Logan City Council funded program. The program gives preference to the use of our [parks](#) and community facilities. Activities delivered in a [Council Community Centre](#) or community facility may be eligible to have venue hire costs reimbursed if a [Council park](#) is not a suitable option for activity delivery. **It is important to note that no venue hire will be paid for activities delivered in your place of business.**

Activities must be delivered within the City of Logan. A map of Logan City can be found [here](#).

Locations may be negotiated with you to ensure an even spread of activities across the City. The more flexible you are with activity locations, the better.

Activity delivery locations and any associated venue hire costs will be negotiated with the Community Programming Officer. If you are requesting venue hire, you may be required to provide proof of venue hire costs if your application progresses.

**Please note, it is solely your responsibility to make all relevant bookings in local parks and venues, should you be successful and this will be communicated to you on successful application.**

**Do you have a park, community centre, or venue in mind to deliver this activity? \***

- ☐ Yes  
☐ No

**What is the name of the park/venue? \***

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**What is the address of the park/venue? \***

Address

  

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

**Have you checked if this park/venue is available and suitable for your proposed activity? \***

☐ Yes

☐ No

You will be responsible for all aspects of organising this location/venue including payment and bookings, if your activity is successful.

**Is venue hire applicable? (Please don't include pool hire here) \***

☐ Yes

☐ No

Please note: there are no venue hire costs associated with delivery of an activity at a Council park.

**Are there pool hire costs to deliver this activity? \***

☐ Yes

☐ No

**Would you be willing to deliver this activity in an alternative location/venue? If so, please select all that apply: \***

- ☐ Yes, I can deliver this activity in a Council park
- ☐ Yes, I can deliver this activity in a community centre or facility
- ☐ No, the delivery location of this activity is not flexible
- ☐ Other:

**What suburbs of Logan are you willing to service? \***

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> All suburbs in Logan | <input type="checkbox"/> Eagleby        | <input type="checkbox"/> Loganlea                | <input type="checkbox"/> Silverbark Ridge |
| <input type="checkbox"/> Bahrs Scrub          | <input type="checkbox"/> Edens Landing  | <input type="checkbox"/> Lyons                   | <input type="checkbox"/> Slacks Creek     |
| <input type="checkbox"/> Bannockburn          | <input type="checkbox"/> Flagstone      | <input type="checkbox"/> Maclean (North & South) | <input type="checkbox"/> Springwood       |
| <input type="checkbox"/> Beenleigh            | <input type="checkbox"/> Flinders Lakes | <input type="checkbox"/> Marsden                 | <input type="checkbox"/> Stockleigh       |
| <input type="checkbox"/> Belivah              | <input type="checkbox"/> Forestdale     | <input type="checkbox"/> Meadowbrook             | <input type="checkbox"/> Tamborine        |
| <input type="checkbox"/> Berrinba             | <input type="checkbox"/> Glenlogan      | <input type="checkbox"/> Monarch Glen            | <input type="checkbox"/> Tanah Merah      |
| <input type="checkbox"/> Bethania             | <input type="checkbox"/> Greenbank      | <input type="checkbox"/> Mount Warren Park       | <input type="checkbox"/> Underwood        |
| <input type="checkbox"/> Boronia Heights      | <input type="checkbox"/> Heritage Park  | <input type="checkbox"/> Mundoolun               | <input type="checkbox"/> Undullah         |
| <input type="checkbox"/> Browns Plains        | <input type="checkbox"/> Hillcrest      | <input type="checkbox"/> Munruben                | <input type="checkbox"/> Veresdale        |
| <input type="checkbox"/> Buccan               | <input type="checkbox"/> Holmview       | <input type="checkbox"/> New Beith               | <input type="checkbox"/> Veresdale Scrub  |
| <input type="checkbox"/> Carbrook             | <input type="checkbox"/> Jimboomba      | <input type="checkbox"/> Park Ridge              | <input type="checkbox"/> Waterford        |
| <input type="checkbox"/> Cedar Creek          | <input type="checkbox"/> Kagaru         | <input type="checkbox"/> Park Ridge South        | <input type="checkbox"/> Waterford West   |
| <input type="checkbox"/> Cedar Grove          | <input type="checkbox"/> Kairabah       | <input type="checkbox"/> Priestdale              | <input type="checkbox"/> Windaroo         |
| <input type="checkbox"/> Cedar Vale           | <input type="checkbox"/> Kingston       | <input type="checkbox"/> Regents Park            | <input type="checkbox"/> Wolffdene        |
| <input type="checkbox"/> Chambers Flat        | <input type="checkbox"/> Logan Central  | <input type="checkbox"/> Riverbend               | <input type="checkbox"/> Woodhill         |
| <input type="checkbox"/> Cornubia             | <input type="checkbox"/> Logan Reserve  | <input type="checkbox"/> Rochedale South         | <input type="checkbox"/> Woodridge        |
| <input type="checkbox"/> Crestmead            | <input type="checkbox"/> Logan Village  | <input type="checkbox"/> Shailer Park            | <input type="checkbox"/> Yarrabilba       |
| <input type="checkbox"/> Daisy Hill           | <input type="checkbox"/> Loganholme     |  |   |

**When looking at location options for your activity, please specify the following: \***

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

- ☐ I can deliver this activity in a Council park
- ☐ I can deliver this activity in a community centre or facility
- ☐ Other:

**Do you have any specific venue/location requirements for the delivery of your activity?**

## Activity Costs

### Participant Fees

A small fee can be charged to participants at each activity. These participant fees are collected and retained by you, as the provider. If you'd prefer not to accept money from participants the activity can be listed as 'free'.

Please consider the benefits to the community of providing a free or low-cost class and choose the smallest participant fee possible to help reduce barriers to participation.

It is important to note, \$5 per person is the maximum amount that can be charged to participants.

**What will the cost be for participants to attend your activity? \***

- ☐ Free (no cost)
- ☐ \$1
- ☐ \$2
- ☐ \$3
- ☐ \$4
- ☐ \$5

**Please explain why the activity costs differ: \***

### Service Provider Funding

Service provider funding of up to \$60 per hour is available for activities delivered in the Active and Healthy program. More detailed information about the [program funding, including FAQ's, can be found here](#).

Value for money is an important consideration when programming Active and Healthy activities. Please consider the potential funds obtained by collecting participant fees for your activity, and what hourly service provider rate you require to deliver your activity.

Please be advised that the provider fee paid is reflective of the activity delivery time. For example, you may opt to be paid \$40/hour, but only deliver a 30 minute activity. You would therefore receive a \$20 service provider fee for the 30 minute activity.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**What hourly service provider rate would you need to be reimbursed in order to successfully deliver your activity: \***

- ☐ \$20/hour
- ☐ \$30/hour
- ☐ \$40/hour
- ☐ \$50/hour
- ☐ \$60/hour

\$60 per hour is the maximum service provider fee available

**Please provide a justification for the rate you have requested:**

Ensure you consider value for money and the funds collected from participant fees when deciding an hourly service provider rate.

**Do you require payment of the Allied Health subsidy (an additional \$10/hr for your activity in addition to your service provider fee) in order to deliver your activity? \***

- ☐ Yes
- ☐ No

## Cooking Class - Cost Breakdown

To enable the delivery of cooking workshops, additional funding may be provided for consumables associated with your cooking class delivery. Items that may be funded include cooking ingredients, pantry essentials and consumable items including things such as paper towel and foil.

Please provide a detailed cost breakdown of any expenses you are requesting to be funded. Please ensure this cost breakdown is for one cooking class session. **Please do not include in-kind expenses in this cost breakdown.**

Please note, you may be required to show proof of consumable costs if your application progresses.

Expenses	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

## Venue Hire Costs

**What is the hourly rate to hire the venue?**

\$

Must be a dollar amount.

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

Please be aware that you may be required to provide a quote for venue hire costs if your application is successful.

## Pool Hire - Cost Breakdown

To enable the delivery of activities requiring the use of a pool, additional funding may be provided to cover pool hire costs.

**Please provide a detailed cost breakdown of any expenses you are requesting to be funded. Please ensure this cost breakdown is reflective of the costs for one activity session (e.g. 1 hour class). Please do not include in-kind expenses in this cost breakdown.**

Please note, you may be required to show proof of pool hire costs if your application progresses.

Expenses	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

## Access and Inclusion

Logan City Council are committed to ensuring that people of all abilities and backgrounds are able to fulfil their potential in the City of Logan.

Providers are expected to ensure activities are accessible and inclusive wherever possible.

**How will you ensure this activity is accessible and inclusive of the wider Logan community? \***

Word count:

Must be at least 20 words.

This includes accessible classes for those with disability (visible and non-visible), and inclusive of those from diverse cultural backgrounds and our First Nations People.

## Booking Information

Activity contact information will be displayed to the general public for successful providers in the Active and Healthy booklet and as part of the wider marketing campaign. The information provided will consist of:

- trading name
- contact number

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

- email address
- booking webpage link (if relevant)

It is recommended you provide both a phone number and email address, however, if you would only like to provide one form of contact, please specify this below.

This contact information will be provided for all activities, whether or not bookings are required.

If bookings are required, please indicate below so we can ensure this is specified with your activity details.

## **Are bookings required for your activity? \***

- ☐ Yes  
☐ No

If bookings are not required, it is assumed that participants can show up on the day and partake in the activity

## **Please provide the email address for general public information and bookings:**

Must be an email address.

## **Please provide the phone number for general public information and bookings:**

Must be an Australian phone number.

## **If participants are able to book via a website, please provide a link:**

Must be a URL.

## **Are participants required to bring anything to the activity? If so, please specify: \***

## Activity Promotion

If successful, we will promote your activity in our Active and Healthy booklet and as part of our wider marketing campaign.

However, as the provider, you are ultimately responsible for the promotion and success of your individual activity/s. Activities which consistently have low or no attendance after a three month period may be removed from the program.

## **What steps will you take to promote this activity to ensure success? \***

## Other Activity Information

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

**If there is any information about your activity that hasn't been covered above, please outline here:**

## Active & Healthy Launch Event

**\* indicates a required field**

### Expressions of Interest

To launch the Active & Healthy program for 2024/2025, a come and try event will be hosted in late July 2024.

Council is seeking expressions of interests from potential providers to deliver an activity or host a stall at this event.

Come and try Active & Healthy is a one-day event to showcase the physical activity, health and wellbeing programs and activities on offer in the City of Logan. **In 2022, the event attracted over 100 participants, with 81% of participants trying something new on the day.** The event is an opportunity for residents to participate in a free activity and learn about the different activities available in their local community.

We are seeking expressions of interest from potential providers to:

1. deliver a health and wellbeing activity on the day, and/or
2. host an information stall.

**If your application is successful, are you interested in taking part in the Active & Healthy launch event in July 2024?**

- ☐ Yes  
☐ No

**Please tell us how you'd like to be involved: \***

- ☐ Deliver an activity  
☐ Host a stall

At least 1 choice must be selected.  
Select all that apply.

### Proposed Activity Information

**What is the name of your activity? \***

Must be an activity you have applied for in this application.

**What is your preferred time to deliver your activity on the day? \***

- ☐ 10 am



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- ☐ 10:30 am
- ☐ 11 am
- ☐ 11:30 am
- ☐ 12 pm
- ☐ 12:30 pm
- ☐ 1 pm
- ☐ 1:30 pm
- ☐ 2 pm
- ☐ 2:30 pm

## What are your audio requirements? \*

- ☐ Speakers
- ☐ Microphone
- ☐ Headset
- ☐ Bluetooth (to connect your device)
- ☐ 3.5mm stereo plug
- ☐ Lightning cable to 3.5mm Headphone Jack Adapter
- ☐ Computer (for USB with music)

Select all that apply.

## What are your venue requirements? \*

## Proposed Stall Information

This event is an opportunity for you to promote your business and encourage attendees to register for upcoming activities.

We encourage you to bring along resources that will assist you with engaging community members, including flyers, posters, business cards or merchandise.

## What equipment do you require to host a stall? \*

- ☐ Table
- ☐ Tablecloth
- ☐ Chairs
- ☐ Marquee (if outdoors)
- ☐ I can supply my own equipment

## Please tell us what resources you will bring to promote your business? \*

Flyers, pull-up banners etc.

## How many staff will attend? \*

- ☐ 1 (Just me)
- ☐ 2
- ☐ 3

A Community Programming Officer will review this information to understand provider requirements for a launch event. The event will be organised based on interest from providers, venue availability and Council's capacity.

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Event information including date, time, run sheet and program will be shared to you by **June 2024**.

## Marketing and Promotion

\* indicates a required field

If successful, we will promote your activities in our Active & Healthy booklet and as part of our wider marketing campaign.

However, as the provider, you are ultimately responsible for the promotion and success of your individual activity/s. Activities which consistently have low or no attendance after a three month period (one programming block) may be removed from the program.

**What steps will you take to promote your activities to ensure success? \***

Please include the various channels you will utilise to promote your activities i.e. social media, newsletters, word of mouth.

## Access and Inclusion

\* indicates a required field

Logan City Council is committed to ensuring that people of all abilities and backgrounds are able to participate in the Active & Healthy program and fulfil their potential.

Providers are expected to ensure activities are accessible and inclusive wherever possible.

**How will you ensure your activities are accessible and inclusive of the wider Logan community? \***

This includes accessible classes for those with disability (visible and non-visible), and inclusive of those from diverse cultural backgrounds and our First Nations People.

**Have you applied for an activity that is intended for any of the following groups? Please select all that apply: \***

- ☐ People with disability
- ☐ People from a culturally and linguistically diverse background
- ☐ Aboriginal or Torres Strait Islander Peoples
- ☐ Other:

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☐ No

**Please detail how you will ensure your activity is appropriate, accessible and inclusive for the intended group/s: \***

**Please outline any relevant courses, workshops, education or training you have undertaken that supports your capacity to provide accessible and inclusive activities:**

This includes cultural awareness and competency training, and disability awareness workshops etc.

## Provider Certification and Documents

**\* indicates a required field**

To be eligible as a provider, you will need to provide:

- \$20 million public liability insurance
- accredited first aid and CPR qualifications
- copies of all facilitator Blue Cards, if required by Blue Card Services
- a copy of the risk management plan for your activity
- copies of relevant qualifications for your activity (if required)

Providers must ensure certificates and insurance are maintained for the duration of the activity and certification must be renewed prior to the expiry dates. Any changes/updates to certification must be provided to the Active & Healthy team.

**Copies of all certification is required with your application, even if you have provided this information to Council previously.**

## Public Liability Insurance

All providers are required to hold a minimum \$20 million public liability insurance.

<b>Please attach a copy of your organisation's public liability insurance</b>	<b>Certificate of Currency - expiry date</b>	<b>Policy Number</b>	<b>Is your insurance for a minimum of \$20 million?</b>
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# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

## (Certificate of Currency)

	This will be the end date of your period of insurance (listed on your Certificate of Currency) Must be a date.		
			<input type="checkbox"/> Yes <input type="checkbox"/> No

## First Aid and CPR Certification

All Active & Healthy providers are required to have at least one person in attendance at each activity with current first aid and CPR qualifications.

It is important to note that first aid certificates remain valid for three years from the date of issue. CPR certificates must be refreshed every 12 months in order to remain valid.

**Please complete the below table and click 'Add More' for each additional certificate:**

Name	Certificate type	Date of Issue	Please check and confirm that the certification is current	Please upload copies of your certification
		The date the certification was issued will be listed on certificate. Must be a date.	CPR expires 12 months after date of issue. First aid expires 3 years after date of issue.	
First Name      Last Name	<input type="checkbox"/> Provide First Aid <input type="checkbox"/> Provide Cardiopulmonary Resuscitation/CPR		<input type="checkbox"/> Yes, certification is current <input type="checkbox"/> No, certification is out of date	

## Working with Children and Young People

You need to determine whether your activity facilitator/s are required to hold a Working with Children and Young People Blue Card or exemption card. To find out whether your facilitator/s require a Blue Card, please see:

- [www.bluecard.qld.gov.au/employees/doineedabluecard.html](http://www.bluecard.qld.gov.au/employees/doineedabluecard.html) (paid workers)
- [www.bluecard.qld.gov.au/volunteers/doineedabluecard.html](http://www.bluecard.qld.gov.au/volunteers/doineedabluecard.html) (volunteers)

**Are your facilitator/s required to hold a blue card to deliver your activity? Or do they hold an exemption card? \***

- ☐ Yes  
☐ No

**If no, please explain why your facilitator/s are not required to hold a blue card: \***

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Please attach a copy of the blue card certification for each person delivering the activity, or proof of exemption.

To add more than one file, please click 'Add More'.

## Blue Card/Exemption upload \*

Attach a file:

If you are exempt from having a blue card, please upload proof of exemption from Blue Card Services. Documents can be uploaded as a single file or multiple files.

## Risk Management Plan

You are required to have a risk management plan for your activity.

You can use this [risk management plan template](#) to assist in the creation of a risk management plan for your activity. You can also use your own template if you'd prefer.

Your risk management plan should outline all possible risks associated with your activity. This may include risks to participants (e.g. burns, slipping etc), risks to activity delivery (e.g. availability of facilitators, venue, weather etc) and any other risks unique to your activity.

Please provide as much information as possible in your plan.

## Please attach a copy of the risk management plan for your activity. \*

Attach a file:

## Declaration

\* indicates a required field

## Annual Provider Forum and Disability Awareness Training

Our annual provider forum will provide you more information about the Active & Healthy program, the requirements and important program updates for the 2024/2025 program. Following the provider forum, a Disability Awareness Training session will be offered to you.

This 4-hour training session will invite you to become curious and learn more about disability, social inclusion and ways you can build the capacity of your organisation whilst also adapting activities as necessary.

Please note, attendance is mandatory for all providers.

### Provider Forum and Disability Awareness Training Information

**Day:** Friday 10 May 2024

**Time:** 9:30 am to 4 pm

**Where:** Logan City Council Administration Building – 150 Wembley Road, Logan Central - Corporate Training Room 1

**If successful, I am available to attend: \***

# Active & Healthy Program 2024/2025 - Request for Proposal Form Preview

- ☐ Yes
- ☐ No

## Willingness to work with Local Government

If successful as an Active & Healthy program service provider, you will be required to:

- sign a contract with Council
- complete a provider induction
- attend mandatory training workshops
- take bookings for your activity (if required) and respond to general enquiries
- ensure that every participant completes a registration form each block, even if they have completed one before
- complete end-of-block reporting, providing all registration forms to Council and an invoice by the due date stated in your contract
- accept Council's payment terms and conditions (payment will be made 14 days from the date of invoice, subject to reporting completion)
- wear an Active & Healthy t-shirt and display a corflute sign at every activity (these will be provided to you)
- update Council with relevant certification and qualifications as it becomes out of date
- book your venue and arrange payment for the hire costs, if required (Council will reimburse you for this once your activities are delivered). If you want to run your activity in a local park, you'll need to make a booking with Council's parks department at [logan.qld.gov.au/parks](https://logan.qld.gov.au/parks).
- assist Council in promoting your activity. All promotional material must include Active & Healthy wording and Council logos.

### **Privacy Collection Notice:**

*Logan City Council is collecting your personal information for the purposes of assessing your application. Your personal information may be accessed by employees, contractors, and/or Councillors of Logan City Council, and other Government agencies. Your personal information will be handled in accordance with the Information Privacy Act 2009 (Qld) and may be released to other parties where Logan City Council is required or authorised by law to do so. For more information on Council's Privacy Policy, see [logan.qld.gov.au/about-council/contact-us/privacy](https://logan.qld.gov.au/about-council/contact-us/privacy)*

### **Transfer of personal information overseas**

*Logan City Council is utilising software that is located overseas to create this online form. You are agreeing that your personal information may be transferred and/or stored in an overseas facility.*

**I am happy with the above and am willing to work with Council \***

- ☐ Agree
- ☐ Do not agree

## Declaration

\*

First Name

Last Name

# Active & Healthy Program 2024/2025 - Request for Proposal

## Form Preview

**Date \***

Thank you for taking the time to put together an application. Once submitted, you will receive a confirmation email. If you do not receive this email, please ensure you have properly submitted your application or check your junk email folder.

**If you do not receive a confirmation of submission email then you should presume that your application has not been submitted.**