Active and Healthy Program - Request for Proposal

* indicates a required field

Active and Healthy Program Information

Are you passionate about helping the community? Do you want to deliver meaningful activities that make a difference for children and families, our multicultural communities, and people with disability living in Logan?

The Active and Healthy program provides residents with access to a range of local, affordable activities that promote good health and physical activity across the City.

Successful activities from this round of funding will be delivered between 1 November 2022 to 30 June 2023. There will be a four week break from Monday 12 December 2022 to Sunday 8 January 2023. Activities are not delivered on public holidays.

Please ensure you have read the <u>'Request for Proposal' information sheet</u> prior to submitting an application.

It is important to note the service provider rate in the 'Request for Proposal' information sheet. As part of the Active and Healthy program you will receive the following:

- a service provider rate of \$20 per hour
- the ability to charge up to \$5 per participant, per session (this will be collected and retained by you, not Council)
- a travel subsidy for eligible applications \$20 per activity. To be eligible, you must travel to deliver activities in Council's regional suburbs (and not live in the area)
- reimbursement of part or all of your venue hire costs (if required for your activity)
- promotion of your activity through Council booklets, website, social media and community events
- a cooking activity may have the costs of ingredients reimbursed.

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 three activities per application. If you have more than three activities to submit, you'll need to put in a separate application form.

Applications close on Tuesday, 4 October 2022. We'll be in touch if you are successful by 21 October 2022.

Have you read the 'Request for Proposal' information sheet?'	k
O Yes	
O No	
Please read the information sheet and select 'yes' in order to continue.	

Please ensure you read the <u>'Request for Proposal' information sheet</u> before completing your application.

Business Information

* indicates a required field			
Name of business/organisa	tion *		
Organisation Name			
ABN *			
The ABN provided will be used check that you have entered the			Click Lookup above t
Information from the Australian B	usiness Registe	r]
ABN			
Entity name			
ABN status			
Entity type			
Goods & Services Tax (GST)			
DGR Endorsed			
ATO Charity Type	More inform	<u>ation</u>	
ACNC Registration			
Tax Concessions			
Main business location			
Must be an ABN.			J
Applicants name *			
Organisation Name			
Applicants role in the orgar	isation *		
Applicants Phone Number *	c		
Must be an Australian phone numl	ber.		
Please include area code.			
Applicants Email address *			
Must be an email address.			
Street Address *			
Address			

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.
Mailing Address * Address
Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.
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: *
riease describe your activity.
Word count: Must be at least 20 words.
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?
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:
 Which category does your activity best align with? * Children and family activities Cooking and nutrition classes Fitness and sports Environmental activities Gentle movement classes Wellbeing workshops
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 <u>Australian Dietary Guidelines</u> .
Please describe what is involved in the delivery of your sessions: *
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.
Activity Delivery
What format is your activity delivered in? * ○ In person ○ Online
Is your activity for a particular age group? * O Yes O No (all ages)
E.g. children, seniors, over 14 years, 3-7 years.
Please specify what age
group your 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 your activity? *	Must be a number. Please keep in mind venue capacity and safe ratio of participants to facilitator.				
How long will your 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 your 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 your activity run? * 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 your activity run during to Yes Providers are able to decide if their a	the school holidays? * O No activity will continue to be delivered during school holidays.				
What date/s will your activity	run? *				
Please outline specific activity date/s	s between 1 November 2022 and 30 June 2023.				
Please specify: *					

Please outline when your activity would	be delivered.
Activity Cost	
A small foo can be charged to parti	cipants at each activity. Those
A small fee can be charged to particle collected and retained by you, as the particle particle and retained by you, as the particle particle and retained by you.	ne provider. If you'd prefer not
It is important to note you cannot cost.	harge more than \$5 per perso
What will the cost be for partici Free (no cost) \$1 \$2 \$3 \$4 \$5	pants to attend your activ
Please explain why the activity	costs differ *
Activity Location	
Activities must be delivered within I	Logan. A map of Logan City ca
Locations may be negotiated wi across the City. The more flexib beneficial for your application t	le you are with locations, t
Please keep in mind that if your act activity changes, this may affect yo Healthy program.	
A travel subsidy may be provided if suburbs and don't already live in th application.	
Please note: it is solely your resvenues and parks, should you b	sponsibility to make all relo e successful.
Do you have a location/venue in ○ Yes ○ No	n mind for your activity? *
What is the name of the	
location/venue? *	

What is the address of the location/venue? *				Address						
				Address Line Country are			tate	/Pro	vin	ce, Postcode, and
th av fo	ave you checked if is location/venue is ailable and suitable ryour proposed tivity? *					onsible for all a payment and b	spec			ganising this location/ your activity is
Is *	venue hire applica	bl	e?	○ Yes			0	No		
What is the hourly rate to hire the venue?			/are					to provide a quote for essful.		
be ac	required, would yo willing to deliver tivity in other Loga burbs? *	yo	ur	○ Yes			0	No		
w	hat suburbs of Log	ıar	are vo	ou willing t	n s	ervice? *				
	All suburbs in Logan		Eagleb	y		Loganlea				Silverbark Ridge
				Landing		Lyons				Slacks Creek
Ш	Bannockburn	Ш	Flagsto	ne		Maclean (No outh)	rth &	X	Ш	Springwood
П	Beenleigh	П	Flinder	s Lakes		Marsden			П	Stockleigh
		_	Foresto			Meadowbroo	k			Tamborine
	Berrinba		Glenlog	gan		Monarch Gle	n			Tanah Merah
	Bethania		Greenb			Mount Warre	en Pa	ark		
	Boronia Heights		Heritag			Mundoolun				
	Browns Plains		Hillcres Holmvi			Munruben New Beith			_	Veresdale Veresdale Scrub
	Buccan Carbrook		Jimboo			Park Ridge				Waterford
	Cedar Creek		Kagaru			Park Ridge S	outh			Waterford West
	Cedar Grove		Kairaba			Priestdale				Windaroo
	Cedar Vale		Kingsto			Regents Parl	<			Wolffdene
	Chambers Flat		Logan			Riverbend				Woodhill
	Cornubia		_	Reserve		Rochedale S	outh			Woodridge
	Crestmead Daisy Hill				Ш	Shailer Park				Yarrabilba

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, 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? * O 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 speci
Activity Promotion
If successful, we will promote your activity as part of our Active and Healthy booklet an wider marketing campaign.
However, as the provider, you are ultimately responsible for the promotion and success your individual activity/s. Activities which consistently have low or no attendance after three month period may be removed from the program.
What steps will you take to promote your activity to ensure success? *
If there is any information about your activity that hasn't been covered above please provide more details here:
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.

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?
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:
Which onto your pativity heat plies with?
 Which category does your activity best align with? * Children and family activities Cooking and nutrition classes Fitness and sports Environmental activities Gentle movement classes Wellbeing workshops
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 <u>Australian Dietary</u> <u>Guidelines</u> .
Please describe what is involved in the delivery of your sessions: *
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? * O Demonstration O Group activity (shared cooking) O 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 Delivery

What format is your activity o ○ In person	lelivered in? * Online				
Is your activity for a particula O Yes E.g. children, seniors, over 14 years,	○ No (all ages)				
Please specify what age group your 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.				
How often will your activity re	ın? *				
E.g. Is your activity a one-off cooking Thursday?	workshop or a weekly bootcamp activity that occurs every				
	d you be able to deliver your activity? * Vednesdays □ Thursdays □ Fridays □ Saturdays □				
Will your activity run during t					
 Yes No Providers are able to decide if their activity will continue to be delivered during school holidays. 					
What is the maximum number of participants that can attend your activity? *	Must be a number. Please keep in mind venue capacity and safe ratio of participants to facilitator.				
How long will your 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 your activity? *	Please indicate an idea of time e.g. 9am or if flexible: mid-morning.				
Would you be able to deliver your activity	☐ Yes, before 9am☐ Yes, after 5pm☐ Available on weekends				

outside of standard business hours? *	☐ No, unable to deliver outside of business hours☐ Other:
	Please select all that apply.
What date/s will your activity	run? *
Please outline specific activity date/s	between 1 November 2022 and 30 June 2023.
Please specify: *	
Diagonal time when your patiety	
Please outline when your activity wor	uid be delivered.
Activity Cost	
	rticipants at each activity. These participant fees are the provider. If you'd prefer not to accept money from sted as 'free'.
It is important to note you cannot cost by our program.	charge more than \$5 per person as this is considered low-
What will the cost be for part Free (no cost) \$1 \$2 \$3 \$4 \$5	icipants to attend your activity? *
Please explain why the activit	ty costs differ *

Activity Location

Activities must be delivered within Logan. A map of Logan City can be found <u>here</u>.

Locations may be negotiated with you to ensure an even spread of activities across the City. The more flexible you are with locations, the better. It is beneficial for your application to have greater flexibility around locations.

Please keep in mind that if your activity is successful and the location, date or time of your activity changes, this may affect your ability to continue to be funded by the Active and Healthy program.

A travel subsidy may be provided if you are delivering activities in one of our regional suburbs and don't already live in the area. This will be determined upon successful application.

Do you have a location/venueYesNo	in mind for	your activity? *	
What is the name of the location/venue? *			
What is the address of the location/venue? *	Address Line required.	1, Suburb/Town, State/Pro	ovince, and Postcode are
Have you checked if this location/venue is available and suitable for your proposed activity? *		No sponsible for all aspects o ng payment and bookings	of organising this location/
Is venue hire applicable?	○ Yes	O No	
What is the hourly rate to hire the venue?			ired to provide a quote for uccessful.
If required, would you be willing to deliver your activity in other Logan suburbs? *	○ Yes	○ No	
What suburbs of Logan are yo ☐ All suburbs in Logan☐ Eagleby ☐ Bahrs Scrub☐ Edens I☐ ☐ Bannockburn☐ Flagsto	y Landing	o service? * □ Loganlea □ Lyons □ Maclean (North & South)	☐ Silverbark Ridge☐ Slacks Creek☐ Springwood
 □ Beenleigh □ Belivah □ Berrinba □ Glenlog □ Bethania □ Boronia Heights □ Browns Plains □ Hillcres 	dale gan pank ge Park	 □ Marsden □ Meadowbrook □ Monarch Glen □ Mount Warren Park □ Mundoolun □ Munruben 	 ☐ Stockleigh ☐ Tamborine ☐ Tanah Merah ☐ Underwood ☐ Undullah ☐ Veresdale

□ Cedar Vale □ Kingston □ Regents Park □ Wolffdene □ Chambers Flat □ Logan Central □ Riverbend □ Woodhill □ Cornubia □ Logan Reserve □ Rochedale South □ Woodridge □ Crestmead □ Logan Village □ Shailer Park □ Yarrabilba □ Daisy Hill □ Loganholme	
Access and Inclusion	
ACCESS AND INCIDSION	
Logan City Council are committed to ensuring that people of all abilities and background are able to fulfil their potential in the City of Logan.	nds
Providers are expected to ensure activities are accessible and inclusive wherever poss	ible.
How will you ensure your activity is accessible and inclusive of the wider Log community? *	jan
Word count: Must be at least 20 words. This includes accessible classes for those with disability, and inclusive of those from diverse cult backgrounds and our First Nations People.	tural
Booking Information	
Activity contact information will be displayed to the general public for successful provi in the Active and Healthy booklet and as part of the wider marketing campaign. The information provided will consist of:	ders
 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 y would only like to provide one form of contact, please specify this below.	ou
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 activity details.	your
Are bookings required for your activity? *	
Are bookings required for your activity? * O Yes	

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 specif	 .
Are participants required to bring anything to the activity: if so, please specif	у.
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 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? *	
If there is any information about your activity that hasn't been covered above, please provide more details 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.
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?
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:
Account a me.
Which category does your activity best align with? * Children and family activities Cooking and nutrition classes Fitness and sports Environmental activities Gentle movement classes Wellbeing workshops
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 <u>Australian Dietary</u> <u>Guidelines</u> .
Please describe what is involved in the delivery of your sessions: *

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

 Demonstration Group activity (shared cooking Hands-on class (each participal) 	
Please upload a sample menu Attach a file:	(optional):
This will assist in providing us with a	better understanding of your activity.
Activity Delivery	
What format is your activity d ○ In person	lelivered in? * Online
Is your activity for a particula O Yes E.g. children, seniors, over 14 years,	O No (all ages)
Please specify what age group your 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.
How often will your activity ru	ın? *
E.g. Is your activity a one-off cooking Thursday?	workshop or a weekly bootcamp activity that occurs every
☐ Mondays ☐ Tuesdays ☐ Wordays Please select all that apply. Will your activity run during to Yes	I you be able to deliver your activity? * /ednesdays
What is the maximum number of participants	Must be a number.

that can attend your activity? *	Please keep in mind venue capacity and safe ratio of participants to facilitator.
How long will your 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 your 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.
What date/s will your activity	run? *
Please outline specific activity date/s	between 1 November 2022 and 30 June 2023.
Please specify: *	
Please outline when your activity wor	uld be delivered.
Activity Cost	
	rticipants at each activity. These participant fees are the provider. If you'd prefer not to accept money from sted as 'free'.
It is important to note you cannot cost by our program.	charge more than \$5 per person as this is considered low-
What will the cost be for part Free (no cost) \$1 \$2 \$3 \$4 \$5	icipants to attend your activity? *

Please explain why the activity costs differ *

Activity Location		
Activities must be delivered with	in Logan A man of Logan City	can be found here
Locations may be negotiated across the City. The more flex beneficial for your application	with you to ensure an eve xible you are with location	en spread of activities s, the better. It is
Please keep in mind that if your a activity changes, this may affect Healthy program.		
A travel subsidy may be provided suburbs and don't already live in application.		
Do you have a location/venue O Yes No	e in mind for your activity?	*
What is the name of the		
location/venue? *		
What is the address of	Address	
the location/venue? *		
Have you checked if this location/venue is available and suitable for your proposed activity? *	O Yes You will be responsible for all a venue including payment and b successful.	○ No spects of organising this location/ ookings, if your activity is
Is venue hire applicable?	○ Yes	○ No
What is the hourly rate to hire the venue?	\$ Must be a dollar amount. Please be aware that you may venue hire costs if your applica	pe required to provide a quote for tion is successful.
If required, would you be willing to deliver your activity in other Logan suburbs?	○ Yes	○ No

What suburbs of Log	gar	are you willing to	o s	ervice?		
☐ All suburbs in Logar	n□			Loganlea		Silverbark Ridge
□ Bahrs Scrub		Edens Landing		Lyons		Slacks Creek
☐ Bannockburn		Flagstone				Springwood
	_	er: 1 1 1		outh)	_	C
☐ Beenleigh		Flinders Lakes		Marsden		Stockleigh
☐ Belivah		Forestdale		Meadowbrook		Tamborine
□ Berrinba□ Bethania		Glenlogan Greenbank		Monarch Glen Mount Warren Park		Tanah Merah
☐ Boronia Heights		Heritage Park		Mundoolun		Undullah
☐ Browns Plains		Hillcrest		Munruben		Veresdale
☐ Buccan		Holmview		New Beith		Veresdale Scrub
☐ Carbrook		Jimboomba		Park Ridge		Waterford
☐ Cedar Creek		Kagaru		Park Ridge South		Waterford West
☐ Cedar Grove		Kairabah		Priestdale		
□ Cedar Vale		Kingston		Regents Park		Wolffdene
☐ Chambers Flat		Logan Central		•		Woodhill
□ Cornubia		Logan Reserve		Rochedale South		Woodridge
□ Crestmead		Logan Village		Shailer Park		Yarrabilba
□ Daisy Hill		Loganholme				
Access and Inclus Logan City Council are are able to fulfil their p	co	mmitted to ensuring			ies	and backgrounds
		-	_			
Providers are expected	d to	ensure activities ar	e a	ccessible and inclusi	ve	wherever possible.
How will you ensure community? *	y y	our activity is acce	ssi	ble and inclusive	of t	the wider Logan
Word count:	claa	coc for those with disc	hil:	ty and inclusive of the	co 4	irom divorco cultural
This includes accessible backgrounds and our First			וווטוו	ty, and inclusive of tho	se 1	rom diverse cultural

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? * O Yes
O 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 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 to ensure success? *
If there is any information about your activity that hasn't been covered above, please provide more details here:

Provider Certification

* indicates a required field

To be eligible as a provider you will need to supply us with the following, if your application is successful:

- \$20 million public liability insurance certificate
- accredited first aid and CPR qualifications (for at least one facilitator at each activity)
- copies of blue cards for all facilitators, if required by Blue Card Services
- a copy of the risk management plan for your activity
- copies of qualifications of facilitators delivering your activity (if relevant)

Providers must ensure certificates and insurance are maintained for the duration of the activity and certification must be renewed prior to the expiry dates.

If your application is successful, copies of all certification will be requested by the Active and Healthy team before you are contracted. Copies will need to be provided, even if you have supplied this information to Council previously.

If your activity/s are successfully programmed, do you agree to the following:

I currently have, or am able to obtain, the certification outlined above *

YesNo

I will provide copies of my certification, if programmed, and will ensure these are current for the duration of activity delivery *

Yes

O No

Declaration

* indicates a required field

Do you have any additional comments you'd like to include in regards to your application?

Activities and COVID-19

It is important you take into consideration the health advice from the <u>Queensland</u> <u>Government</u> regarding COVID-19 and the impact this may have on the delivery of any programmed activity/s.

The responsibility lies with you, as a business and service provider, to keep up-to-date and in line with the latest requirements from the Queensland Government which may impact the delivery of your classes. Logan City Council does not have the power and will not be enforcing any guidelines, nor will Logan City Council be making any suggestions as to what you can and can't do.

	egards to delivering your activity, have you taken any relevant health ac consideration? *	lvice
0	Yes	
0	No	

Willingness to work with Local Government

If successful as an Active and Healthy program service provider, you will be required to:

- sign a contract with Council
- complete a provider induction
- ensure that every participant completes a registration form each term
- complete end-of-term 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)
- wear an Active and 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

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

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 wil	lling to work with	Council *
○ Agree			
Do not agree			
*			
First Name	Last Name		

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.