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 activities that make a difference to the health and wellbeing of people living in Logan?

Logan City Council's <u>Active and Healthy program</u> 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 2023 to 30 June 2024. There will be a four week break from Monday 11 December 2023 to Sunday 7 January 2024. 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.

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 Sunday 12 February 2023. We'll be in touch if you are successful by 28 April 2023.

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 <u>'Request for Proposal' information sheet</u> before completing your application.

Business Information

* indicates a required field

Name of business/organisation *

Organisation Name

ABN *

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 Bus | iness Register |
|-------------------------------------|------------------|
| ABN | |
| Entity name | |
| ABN status | |
| Entity type | |
| Goods & Services Tax (GST) | |
| DGR Endorsed | |
| ATO Charity Type | More information |
| 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

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.

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

- O Yes
- O 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 class O Yes O No | ? * |
|---|---|
| Activity Delivery | |
| What format is this activity de | elivered in? * |
| Is this activity for a particular O Yes E.g. children, over 50's, youth (12-17 | ○ No (all ages) |
| 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? * \bigcirc Yes \bigcirc 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 O No Is the activity already being delivered happening at the same day, time and location as requested above in your application? * O No ○ Yes Does the existing activity currently receive funding for delivery? * ○ Yes O 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 <u>Australian Dietary</u> <u>Guidelines</u>.

Please describe what is involved in the delivery of your sessions, including set up and delivery: $\ensuremath{^*}$

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
- O 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 <u>parks</u> and community facilities. Activities delivered in a <u>Council Community Centre</u> or community facility may be eligible to have venue hire costs reimbursed if a <u>Council park</u> 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 <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 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
- O No

| What is the name of the park/venue? * | | |
|--|--|---|
| What is the address of the park/venue? * | Address | |
| | Address Line 1, Suburb/Town, S required. | tate/Province, and Postcode are |
| Have you checked if this park/venue is available and suitable for your proposed activity? * | O Yes You will be responsible for all as venue including payment and be successful. | O No spects of organising this location/ ookings, if your activity is |
| ls venue hire applicable? (Please don't include pool hire here) * | O Yes Please note: there are no venue delivery of an activity at a Coun | |
| 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? *

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

- 🗆 Logan Village
- □ Loganholme
- □ Rochedale South □ Woodridge
- Shailer Park

- □ Yarrabilba

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: *

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
- \bigcirc \$50/hour
- \$60/hour

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

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? *

O Yes

O 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 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 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.

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? $\ensuremath{^*}$



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? *

- 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 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? *

- O Yes
- O 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.

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

- O Yes
- O 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 class? *

- ⊖ Yes
- O No

Activity Delivery

What format is this activity delivered in? *

○ In person

○ Online

Is this activity for a particular age group? * O Yes O 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 and Healthy Program 2023/2024 - 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? *

O Yes O 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? *

| \bigcirc res |
|----------------|
|----------------|

O No

Is the activity already being delivered happening at the same day, time and location as requested above in your application? * \odot Yes \odot 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 <u>Australian Dietary</u> <u>Guidelines</u>.

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
- O 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 <u>parks</u> and community facilities. Activities delivered in a <u>Council Community Centre</u> or community facility may be eligible to have venue hire costs reimbursed if a <u>Council park</u> 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 <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 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

- O res
- O 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 required. | | | |
|--|--|--|--|--|
| Have you checked if this park/venue is available and suitable for your proposed activity? * | O Yes You will be responsible for all as venue including payment and be successful. | No pects of organising this location/ pokings, if your activity is | | |
| ls 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:

What suburbs of Logan are you willing to service? *

- □ All suburbs in Logan□ Eagleby □ Silverbark Ridge □ Bahrs Scrub □ Edens Landing Lyons □ Maclean (North & □ Springwood Bannockburn Flagstone South) □ Marsden □ Flinders Lakes
 □ Forestdale Flinders Lakes Beenleigh Belivah Meadowbrook

 □
 Belivah
 □
 Forestdale
 □
 Meadowbrook
 □
 Tamborine

 □
 Berrinba
 □
 Glenlogan
 □
 Monarch Glen
 □
 Tanah Meral

 □
 Bethania
 □
 Greenbank
 □
 Mount Warren Park
 □
 Underwood

 □
 Boronia Heights
 □
 Heritage Park
 □
 Mundoolun
 □
 Undullah

 □
 Browns Plains
 □
 Hillcrest
 □
 Munruben
 □
 Veresdale

 Meadowbrook
 Iamborine
 Monarch Glen
 Tanah Merah 🗆 Munruben Browns Plains
 Hillcrest
 Munruben
 Veresdale
 Veresdale Scrub
 Carbrook
 Jimboomba
 Park Ridge
 Waterford
 Cedar Creek
 Kagaru
 Park Ridge South
 Waterford West
 Cedar Grove
 Kairabah
 Priestdale
 Windaroo
 Cedar Vale
 Kingston
 Regents Park
 Wolffdene
 Chambers Flat
 Logan Central
 Riverbend
 Woodhill
 Woodhill
 Cornubia
 Logan Village
 Shailer Park
 Yarrabilba Browns Plains
 Hillcrest

- Crestmead
- Daisy Hill

- 🗆 Logan Village
- □ Loganholme

□ Loganlea

- □ Shailer Park □ Yarrabilba
- 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

- □ Slacks Creek

- □ Stockleigh Tamborine

 - Veresdale



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)

- 0 \$1
- O \$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 <u>program funding</u>, 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 avaialble

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? *

- O Yes
- O 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 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 require | d to | show | proof | of | consumable | costs i | if your | applica | ation |
|--------------|---------|------------|------|------|-------|----|------------|---------|---------|---------|-------|
| progresses. | | | | | | | | | | | |

| Expenses | \$ |
|----------|----|
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |

Venue Hire Costs

What is the hourly rate to hire the venue?

| \$ | | | | |
|------|----|---|--------|---------|
| Must | be | а | 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

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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? $\ensuremath{^*}$



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
- 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? *

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
- O 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.

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

- ⊖ Yes
- O 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 class O Yes O No | ? * |
|--|---|
| Activity Delivery | |
| What format is this activity de | elivered in? * O Online |
| Is this activity for a particular O Yes E.g. children, over 50's, youth (12-17 | ○ No (all ages) |
| 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 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: |

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

Please select all that apply.

Will this activity be delivered during the school holidays? * O Yes O 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? * \odot No

Does the existing activity currently receive funding for delivery? * O Yes O 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 <u>Australian Dietary</u> <u>Guidelines</u>.

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
- O No

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 <u>parks</u> and community facilities. Activities delivered in a <u>Council Community Centre</u> or community facility may be eligible to have venue hire costs reimbursed if a <u>Council park</u> 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 <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 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
- O No

| What is the name of the park/venue? * | | |
|--|--|---|
| What is the address of the park/venue? * | Address | |
| | Address Line 1, Suburb/Town, S required. | tate/Province, and Postcode are |
| Have you checked if this park/venue is available and suitable for your proposed activity? * | O Yes You will be responsible for all as venue including payment and be successful. | O No spects of organising this location/ ookings, if your activity is |
| ls venue hire applicable? (Please don't include pool hire here) * | O Yes Please note: there are no venue delivery of an activity at a Coun | |
| 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? *

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

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
- O \$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 <u>program funding</u>, 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
- \bigcirc \$50/hour
- \$60/hour

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

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
- O 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 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 | \$ |
|----------|----|
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |

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? $\ensuremath{^*}$



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
- 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 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:

Would you like to apply for another activity? *

- O Yes
- O 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.

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

- O Yes
- O 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 class?

- ⊖ Yes
- O No

Activity Delivery

What format is this activity delivered in? *

○ In person

○ Online

Is this activity for a particular age group? * O Yes O 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? | |

Active and Healthy Program 2023/2024 - Request for Proposal Form Preview

| | 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: |

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? *

O Yes O 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 <u>Australian Dietary</u> <u>Guidelines</u>.

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

O 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 gualifications: * 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

O No

Active and Healthy Program 2023/2024 - Request for Proposal Form Preview

| What is the name of park/venue? * | the | | | | |
|---|--|--|--|-------|--|
| What is the address the park/venue? * | - | Address Address Line 1 required. | , Suburb/Town, State/Pr | ovin | ce, and Postcode are |
| Have you checked if park/venue is availat and suitable for your proposed activity? * | ole | | O No ponsible for all aspects g payment and booking | of or | |
| ls venue hire applica (Please don't include pool hire here) * | • | | O No ere are no venue hire c activity at a Council par | osts | associated with |
| Are there pool hire control to deliver this activit | | ⊖ Yes | ⊖ N | 0 | |
| Would you be willing please select all that Yes, I can deliver th Yes, I can deliver th No, the delivery loca | a pply: * is activity i is activity i | in a Council p in a communi | ark ty centre or facility | loc | ation/venue? If so, |
| Other: | | | | | |
| What suburbs of Log All suburbs in Logan Bahrs Scrub | an are yo | / [.anding [ne [| | | Silverbark Ridge Slacks Creek Springwood |

- Logan Village
 Loganholme
- Page 36 of 81

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

- □ 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)
- O \$1
- O \$2
- \$3
- O \$4
- \$5

Please explain why the activity costs differ: *

Service Provider Funding

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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 avaialble

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 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 | \$ |
|----------|----|
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |

Access and Inclusion

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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? $\ensuremath{^*}$

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

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 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
- \bigcirc 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: *

Word count: Must be at least 20 words.

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

- ⊖ Yes
- O 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 class O Yes O No | 5? * |
|---|---|
| Activity Delivery | |
| What format is this activity de | elivered in? * Online |
| Is this activity for a particular O Yes E.g. children, over 50's, youth (12-17) | No (all ages) |
| 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

Please select all that apply.

Will this activity be delivered during the school holidays? * O Yes O 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? * \odot No

Does the existing activity currently receive funding for delivery? * O Yes O 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 <u>Australian Dietary</u> <u>Guidelines</u>.

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
- O 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

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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
- O No

| What is the name of the park/venue? * | | |
|--|--|--|
| What is the address of the park/venue? * | Address | |
| | Address Line 1, Suburb/Town, St required. | tate/Province, and Postcode are |
| Have you checked if this park/venue is available and suitable for your proposed activity? * | O Yes You will be responsible for all as venue including payment and be successful. | O No pects of organising this location/ ookings, if your activity is |
| ls venue hire applicable? (Please don't include pool hire here) * | O Yes Please note: there are no venue delivery of an activity at a Coun | |
| 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? *

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

- □ Yarrabilba

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
- O \$2
- \$3
- O \$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 <u>program funding</u>, 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 avaialble

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
- O 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 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 | \$ |
|----------|----|
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |

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? $\ensuremath{^*}$

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? *

- 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 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? *

- O Yes
- O 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.

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

- O Yes
- O 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 class? *

- ⊖ Yes
- O No

Activity Delivery

What format is this activity delivered in? *

○ In person○ Online

Is this activity for a particular age group? * O Yes O 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? * | |

Active and Healthy Program 2023/2024 - Request for Proposal Form Preview

| | 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: |

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? *

O Yes O 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 <u>Australian Dietary</u> <u>Guidelines</u>.

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

O 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 gualifications: * 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

O No

Active and Healthy Program 2023/2024 - Request for Proposal Form Preview

| What is the name of park/venue? * | the | | | | | |
|---|---|---|--|---|-------|--|
| What is the address the park/venue? * | of | Address Address Line required. | 1, Suburk |)/Town, State/P | rovin | nce, and Postcode are |
| Have you checked if park/venue is availat and suitable for your proposed activity? * | ole | | | | ofor | rganising this location/ your activity is |
| ls venue hire applica (Please don't include pool hire here) * | | | | O N no venue hire at a Council pa | costs | associated with |
| Are there pool hire co to deliver this activit | | ⊖ Yes | | <u> </u> | 10 | |
| Would you be willing please select all that Yes, I can deliver th Yes, I can deliver th No, the delivery loca Other: | apply: * is activity is activity | in a Council in a commur | park hity cent | re or facility | e loc | ation/venue? If so, |
| | | | | • | | |
| | - | y _anding | □ Loga □ Lyon | nlea | | Silverbark Ridge Slacks Creek Springwood |
| Belivah Berrinba Bethania Boronia Heights Browns Plains Buccan Carbrook Cedar Creek Cedar Grove Cedar Vale Chambers Flat Cornubia Crestmead | Flinders Forestd Glenlog Greenb Heritag Hillcres Holmvid Jimboon Kagaru Kairaba Kingsto Logan f Logan h Loganh | lale gan pank le Park ew mba mba Central Reserve Village | Mars Mead Mead Mound Mound Mund Mund Mund Mund Park Park Park Pries Rege Rivel Roch | den dowbrook arch Glen ht Warren Par doolun ruben Beith Ridge Ridge South tdale ents Park bend edale South er Park | | Tamborine Tanah Merah Underwood Undullah Veresdale Veresdale Scrub Waterford Waterford West Windaroo Wolffdene Woodhill Woodridge |

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

- □ 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? *

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- O \$1
- O \$2
- \$3
- O \$4
- \$5

Please explain why the activity costs differ: *

Service Provider Funding

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

- \$20/hour
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- \$50/hour
- \$60/hour

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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 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 | \$ |
|----------|----|
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |

Access and Inclusion

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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.

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

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 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
- \bigcirc 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.

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

- ⊖ Yes
- O 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 class O Yes O No | 5? * |
|---|---|
| Activity Delivery | |
| What format is this activity de | elivered in? * Online |
| Is this activity for a particular O Yes E.g. children, over 50's, youth (12-17) | No (all ages) |
| 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

Please select all that apply.

Will this activity be delivered during the school holidays? * O Yes O 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? * \odot No

Does the existing activity currently receive funding for delivery? * O Yes O 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 <u>Australian Dietary</u> <u>Guidelines</u>.

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
- O 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 <u>parks</u> and community facilities. Activities delivered in a <u>Council Community Centre</u> or community facility may be eligible to have venue hire costs reimbursed if a <u>Council park</u> 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 <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 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
- O No

| What is the name of the park/venue? * | | |
|--|---|---|
| What is the address of the park/venue? * | Address | |
| | Address Line 1, Suburb/Town, S required. | tate/Province, and Postcode are |
| Have you checked if this park/venue is available and suitable for your proposed activity? * | O Yes You will be responsible for all as venue including payment and b successful. | O No spects of organising this location/ ookings, if your activity is |
| ls venue hire applicable? (Please don't include pool hire here) | O Yes Please note: there are no venue delivery of an activity at a Coun | |
| 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? *

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

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
- O \$4
- \$5

Please explain why the activity costs differ: *

Service Provider Funding

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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 avaialble

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
- O 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 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 | \$ |
|----------|----|
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |

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? $\ensuremath{^*}$

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? *

- 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 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? *

- O Yes
- O 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.

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

- O Yes
- O 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 class? *

- ⊖ Yes
- O No

Activity Delivery

What format is this activity delivered in? *

○ In person○ Online

Is this activity for a particular age group? * O Yes O 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? * | |

Active and Healthy Program 2023/2024 - Request for Proposal Form Preview

| | 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: |

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? *

O Yes O 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 <u>Australian Dietary</u> <u>Guidelines</u>.

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

O 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 gualifications: * 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

O No

Active and Healthy Program 2023/2024 - Request for Proposal Form Preview

| What is the name of park/venue? * | the | | | | | |
|---|---|---|---|---|-------|--|
| What is the address the park/venue? * | of | Address Address Line required. | 1, Suburk | o/Town, State/P | rovin | nce, and Postcode are |
| Have you checked if park/venue is availat and suitable for your proposed activity? * | ole | | | | of or | rganising this location/ your activity is |
| ls venue hire applica (Please don't include pool hire here) * | | | | O N no venue hire o at a Council par | costs | associated with |
| Are there pool hire control to deliver this activit | | ⊖ Yes | | 0 N | 0 | |
| Would you be willing please select all that Yes, I can deliver th Yes, I can deliver th No, the delivery loca Other: | apply: * is activity is activity | in a Council in a commur | park nity cent | re or facility | e loc | ation/venue? If so, |
| | | | - | | | |
| | - | y _anding | □ Loga □ Lyon | nlea | | Silverbark Ridge Slacks Creek Springwood |
| Belivah Berrinba Bethania Boronia Heights Browns Plains Buccan Carbrook Cedar Creek Cedar Grove Cedar Vale Chambers Flat Cornubia Crestmead | Flinders Forestd Glenlog Greenb Heritag Hillcres Holmvid Jimboon Kagaru Kairaba Kingsto Logan f Logan h Loganh | lale gan pank le Park ew mba mba Central Reserve Village | Mars Mead Mead Mond Mond Mound Mund Mund Mund New Park Park Park Pries Rege Rive Roch | den dowbrook arch Glen nt Warren Par doolun ruben Beith Ridge Ridge South tdale ents Park rbend eedale South er Park | | Tamborine Tanah Merah Underwood Undullah Veresdale Veresdale Scrub Waterford Waterford West Windaroo Wolffdene Woodhill Woodridge |

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

- □ 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)
- O \$1
- O \$2
- \$3
- O \$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 <u>program funding</u>, 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 avaialble

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 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 | \$ |
|----------|----|
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |

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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:

Provider Certification

* indicates a required field

If your application is successful and to ensure program eligibility, you will need to supply us with the following when requested:

- \$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 *

- ⊖ Yes
- O No

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

- ⊖ Yes
- O No

It is a requirement that providers obtain the required certification and provide copies to Logan City Council in order to be contracted as a service provider for the Active and Healthy program. These certificates must be kept current for the duration of activity delivery. Failure to supply this information will lead to contract termination.

Please ensure you are able to provide the certification required and agree to the terms outlined by selecting 'yes' in the questions above.

If you have any concerns around obtaining the relevant certification, please call the Active and Healthy team on 3412 4423 before submitting your application.

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.

In regards to delivering your activity, have you taken any relevant health advice into consideration? $\ensuremath{^*}$

- O Yes
- O 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
- 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 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
- 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.

• assist Council in promoting your activity. All promotional material must include Active and 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 <u>logan.qld.gov.au/aboutcouncil/contact-us/privacy</u>

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

| * | |
|------------|-----------|
| 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.