

# Active People - Travel Assistance Grant Application Form

## Form Preview

### Travel Assistance - Application Form

\* indicates a required field

The Active People - Travel Assistance funding program aims to provide the City of Logan residents with assistance in covering costs associated with attending State, National or International competitions.

We provide funding to help pay for the following:

- Direct travel and accommodation expenses;
- Compulsory competition fees; and
- Compulsory uniform items.

Before commencing your application, please ensure you familiarise yourself with the Sport & Recreation funding guidelines: [Sport and recreation funding | Logan City Council](#)

#### BEFORE YOU START

- Please carefully read the [guidelines](#) prior to completing this form
- Please note the applicant is the person attending the competition
- If the applicant is under 18 years of age a parent/ guardian is only permitted to complete the application
- Payment will be made into the Nominated Bank Account after the event date.
- Answer each question fully and complete the applicant declaration
- Incomplete applications will not be considered

#### Acquittal

If you have not acquitted previous funds this application will not be considered

**Have you acquitted funds from previous funding application? \***

- I have NEVER received funding through this grant before
- Yes (I have received a grant and acquitted)
- No (I have received a grant but not yet acquitted)

#### Council Employee - Conflict of Interest

**Are you a current employee of Logan City Council?**

- Yes
- No

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Full time, part time, temporary

### Conflict of Interest Declaration Form

If you are a current Council employee you are required to declare any potential conflicts of interest. Please complete the Conflict of Interest Declaration - Assessment Form found on the Buzz and upload here. If you have any questions regarding this process, please contact the Sport and Recreation Project Officer on 3412 4886. If you are an employee of Logan City Council and do not attach a completed Conflict of Interest Declaration - Assessment Form your application will not be processed.

#### Upload Conflict of Interest Declaration - Assessment Form

Attach a file:

Council's Code of Conduct requires ALL employees to declare any potential conflicts of interest. It is your responsibility to comply with the Code of Conduct by completing and signing the declaration.

### Applicant Details

#### Applicant Name (competitor) \*

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

#### Gender \*

Male       Female       Genderqueer/ Non-Binary       Other:

#### Date of Birth \*

#### Address \*

Address

  
  
Suburb    State    Postcode  
        

#### Postal Address (if different from above)

Address

  
  
Suburb    State    Postcode  
        

#### Please provide proof of residency. \*

Attach a file:

eg most recent rates, electricity bill or current rent notice or drivers licence

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**Phone Number \***

**Mobile Phone Number**

**Email \***

Parent/Guardian Details

**Is the applicant under 18yrs?**

**Please complete if applicant is under 18yrs of age.**

**Parent/Guardian Name \***

Title

First Name

Last Name

## Championship Details

\* indicates a required field

This section is seeking information about the Championship the applicant wishes to attend.

**Sport \***

**Age Group \***

**Please indicate the name of the competition you will be attending including the location and the date of the competition:**

**Competition Name \***

**Type of Competition \***

State Championship (representing your region)

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- National Championship (representing Queensland)
- International Championship (representing Australia)

Only sports listed on the Australian Sports Directory of the SportAUS website will be supported for International funding

### Competition Location \*

### Competition Start Date \*

Must be a date

### Competition End Date \*

### Please provide evidence that you attended and participated in your nominated event. (Event must be no more than 6 months prior to date of application) \*

Attach a file:

This should be on letterhead from club or affiliated body and include applicants name, event name, venue and date. It must clearly demonstrate attendance at nominated event, not selection to attend.

### Is prize money awarded at this competition?

- Yes
- No

## Finance

\* indicates a required field

This section is seeking information about the expenses incurred by the applicant attending the identified Competition.

### Have you applied for funding to attend this event from any other source? \*

- Yes
- No

For example; State Sporting Body

### If yes, please provide details:

### Total expenses for the Competition:

Must be a dollar amount

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### Total Amount Requested \*

\$

What is the total financial support you are requesting in this application? Note, the guidelines below.

Up to \$300:

- State Championship
- National Championship

Up to \$500:

- International Championship

Up to \$300

- International Championship held in Australia

### Payment

**Please attach evidence of payment of competition expenses eg. receipts for air fare, accommodation, registration fees, fuel, etc \***

Attach a file:

Proof of payment must be a receipt from club or affiliated body and include event name, participant or parent name and date.

### Bank Account Name \*

Please ensure the Bank Account Name is EXACTLY how it appears on the Bank Statement Account Details. Note: Funds will be paid to individuals, not organisations and if details are not correct this may impact payment of funds.

### Bank Name \*

### BSB Number \*

### Bank Account Number \*

**Please attach a Bank Statement Header to verify bank account details \***

Attach a file:

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### Supporting Information

\* indicates a required field

Please upload any required supporting documentation:

Attach a file:

### Feedback

#### How did you hear about the Grants Program? \*

- Logan City Council website
- Council's Facebook page
- Our Logan magazine
- Newspaper advertisement
- E-mail
- Word of mouth
- Other:

#### What area is your grant for? \*

- Service to community
- Infrastructure
- Equipment
- Sport
- Travel
- Event
- Project
- Other:

### Certification / Declaration / Consent

Logan City Council and Brisbane Lions may from time to time wish to contact you for media opportunities for the promotion and growth of the program.

Consent:

- I give my consent to be contacted regarding media and promotion
- I do not give my consent to be contacted regarding media and promotion

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In submitting this application I certify / declare that:

1. To the best of my knowledge the information provided is true and correct;
2. I have read the associated funding guidelines detailed on the Logan City Council Website; and
3. I understand that if successful, I am required to accept the conditions of this grant in accordance with Council's accountability and reporting requirements.

**Please select:**

### **Privacy Collection Notice**

Logan City Council is collecting your contact details and program specifics to correctly place your application through our grants process. The information will only be accessed by employees and/or Councillors of Logan City Council. Your information will not be given to any other person or agency unless you have given permission or we are required by law.

### **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.