



# Healthy Canteen Incentive Application Form

## 1. APPLICANT PROFILE

Club Name:		
Contact person:	Position:	
Postal address:		
	Postcode:	
Telephone:	Mobile:	
Email:		
ABN:		
Is your club affiliated with the State Association? Yes No		
What is the name of the State Association?		
How many members do you have in your club?		
Last season: _____		
Current season: _____		
Is your club incorporated? [Please attach a copy of your Incorporation Certificate]	Yes	No
Does your organisation have current public liability insurance? [Please attach your certificate of currency]	Yes	No
Is your club registered for GST?	Yes	No
Menu assessment results attached	Yes	No

## 2. PROJECT DETAILS

Please provide a brief overview of the Healthy Canteen changes your club would like to make?

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How will this incentive assist in achieving your clubs goals?

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Please list attached quotes of products you intend on purchasing:

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How will your club's canteen promote healthier food and drinks offered?

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### 3. PROJECT BUDGET

Funding Source	Cost \$ (Ex GST )	Notes
Applicant's Cash		How much cash will your organisation contribute?
Funding Requested from the City of Cockburn		How much money are you requesting from the City of Cockburn?
Other		Other amounts being contributed to the project? And from WHO?
<b>Total Project Cost</b>		

### 4. FUNDING AGREEMENT

If your organisation's funding application is successful, your organisation will be required to enter into a formal funding agreement with the City of Cockburn. This agreement will contain a comprehensive set of provisions designed to protect the interests of the applicant organisation and the City of Cockburn.

#### UNDERTAKINGS AND CONDITIONS

*If the application is successful these undertakings and conditions will form part of your contract with the City of Cockburn.*

1. We agree to acknowledge the City's funding through all promotional avenues. Acknowledge the City's funding by displaying signage if applicable (supplied by Council).
2. We are prepared to undertake joint media promotion with the City.
3. We recognise that special conditions may need to apply to the funding addressing relevant elements of the City's Strategic Plan to compliment the organisation's objectives.
4. All funds expended will be as per items approved in this funding application.
5. We agree to provide a report detailing the acquittal of the project funds [on the form provided] within two months of the project's completion.

## 5. BANK ACCOUNT DETAILS

If your application is successful and you wish to receive electronic funds transfer, please provide the following information:

Organisation Name: \_\_\_\_\_

*(Name of the incorporated organisation applying for the funding)*

Name of Bank: \_\_\_\_\_

Branch Location: \_\_\_\_\_

Branch Code/BSB Number: \_\_\_\_\_

Account Name: \_\_\_\_\_

Account Number: \_\_\_\_\_

## 6. DECLARATION

*I hereby certify that I have been authorised to prepare and submit this application. The Information contained herein is to the best of my knowledge true and correct.*

Name [Block Letters]			
Signature			
Position Held		Date	

For more information email: [recreation@cockburn.wa.gov.au](mailto:recreation@cockburn.wa.gov.au) or call 9411 3444.