Eligibility
* indicates a required field
Is the applicant organisation a not for profit? *  ○ Yes  ○ No
If you answered 'no' to this question your organisation is not eligible to apply for CUTHS
Is your organisations ABN registered as; *  Australian public company Charitable fund Cooperative Incorporated association School
If your organisation is not registered as one of the above entity types it is not eligible to apply for CUTHS
Has your organisation already received CUTHS for the 2023-24 financial year? *  ○ Yes  ○ No
If your organisation has received \$7000 in CUTHS in the 2023-24 financial year your organisation is not eligible for further sponsorship.
Does this event currently receive funding from the City of Melbourne or have you applied for funding to another area of the City of Melbourne? *  ○ Yes ○ No
If you have answered 'yes' to this question you are not eligible for additional funding for this event.
View a map of City of Melbourne municipality
To be eligible for CUTHS the applicant organisation must provide services or

benefits within the City of Melbourne municipality. Describe the services or

benefits the applicant organisation provides to the City of Melbourne community

Word count: Must be between 20 and 100 words.		
Applicant details		
* indicates a required field		
Organisation details		
Organisation name *	Organisation Name	
Street address *	Address	
Postal Address *	Address  If you are using a PO Box click into the "Can't find address?", you can then ma	e box above and select anually enter your address
Phone number *		
Email address *		
Website	Must be a URL.	
ABN *	The ABN provided will be used to le information. Click Lookup above to entered the ABN correctly.	
	Information from the Australian Busin	ess Register
	ABN	
	Entity name	
	ABN status	
	Entity type	
	Goods & Services Tax (GST)	

	DGR Endorsed			
	ATO Charity Type More informa		<u>ation</u>	
	ACNC Registration			
	Tax Concessions			
	Main busi	ness location		
	If you are organisati	applying using an au	uspice use the auspi	ce
	or garnisaer	011371311		
What is the aim of your organisation? *				
	Word count: Must be no more than 50 words.			
Contact Person				
Contact name *	Title	First Name	Last Name	
Position *				
Phone number *				
Mobile phone number				
Email address *				
Applicant type				
* indicates a required field				
Are you applying as *  ○ an organisation	<ul> <li>an organisation or group with an auspice</li> </ul>			
Auspice details				
An auspice is an organisation that has agreed to take legal and financial responsibility for administering the sponsorship on behalf of the applicant where an applicant is not eligible or unable to apply for funding.				
Applications from individuals or for profit organisations cannot be auspiced.				
Ausnico organisation	Organica	tion Nama		
Auspice organisation Organisation Name name *				

Auspice contact person *	Title	First Name	Last Name	
Auspice contact email *				
Auspiec contact eman				
Auspice ABN *				
	The ABN	provided will be us	sed to look up the	following
	information	on. Click Lookup al he ABN correctly.		
	Informatio	on from the Australia	n Business Register	•
	ABN			
	Entity nar	ne		
	ABN statu	S		
	Entity typ	e		
	Goods & S	Services Tax (GST)		
	DGR Endo	rsed		
	ATO Chari	ty Type	More informa	ation at the same
	ACNC Reg	istration		
	Tax Conce	essions		
	Main busi	ness location		
Confirmation of auspice	Attach a f	file:		
agreement *				
Event details				
* indicates a required field				
Which venue are you using? *  O Melbourne Town Hall  O Meat Market				
○ Kensington Town Hall				
Date of event *				
Event must take place between 1 Jul	/ 2023 and	30 June 2024		
Event must take place between 1 Jul  Total Amount Requested *	/ 2023 and	30 June 2024		

you have received from the venue

Copy of the event proposal / quote provided by the venue * Attach a file:
What is the name of your event? *
What do you aim to achieve by holding this event? *
Word count: Must be between 20 and 70 words.
Briefly describe what will happen at your event? *
Word count: Must be between 20 and 70 words.
Participation
* indicates a required field
Note that for this program
<ul> <li>Vulnerable people refers to people who;</li> <li>are homeless;</li> </ul>
<ul> <li>are newly arrived migrants or refugees;</li> </ul>
<ul><li>are socially and economically disadvantaged; or</li><li>have a disability;</li></ul>
<ul> <li>Participate refers to people being involved in organising, running, volunteering, presenting or performing at an event.</li> </ul>
Attendee refers to someone who attends the event as an audience member.
CUTHS focusses on local and/or vulnerable people. How will you ensure that residents (of the City of Melbourne municipality) or vulnerable people participate in your event? *
in your evener
Word count: Must be between 20 and 100 words.
What is the primary target group for your event? *

How many people do you expect to attend your event? *
How many of the expected attendees will be City of Melbourne residents and/or vulnerable people? *
Do you intend to invite a representative from Council? *  ○ Yes  ○ No
Who do you intend to invite? *
If you would like to invite the Lord Mayor or a Councillor please send invitations to the Lord Mayors Office and/or Councillor Support GPO Box 1603, Melbourne, Vic, 3000
Do you think this event will attract media attention? *  ○ Yes  ○ No
Please describe the media attention *
Word count: no more than 50 words
Financial information
* indicates a required field
Do you intend to charge an entry fee? *  ○ Yes  ○ No
What will the entry fee cost? *  \$ Must be a dollar amount.
What will the concession entry fee cost? *  \$ Must be a dollar amount.

Do you have any additional funding for this activity, including any other funding from the City of Melbourne?  $\mbox{\ensuremath{^{*}}}$ 

○ Yes		○ No			
Who is providing the additional funding? *					
How much funding a \$ Must be a dollar amount.	re you receiving? *				
Is the funding confir	med or not confirmed	d? *  Not confirmed			
Budget					
_	costs associated with y income and expenditur		ed.		
Income	\$	Expenditure	\$		
CUTHS funding	\$	Venue hire	\$		
Your organisations contribution	\$	Catering	\$		
Other funding (add details below)	\$	Audio visual equipment	\$		
	\$		\$		
	\$		\$		
Budget Totals  It is expected that income will match expenditure and events will break even except where the event is for fund raising purposes					
Total Income Amount	Total Expenditure Amo	unt Income - E	xpenditure		
\$	\$	\$			
This number/amount is calculated.	This number/amo calculated.	ount is This nur calculat	mber/amount is ed.		
Is your event a fundraiser? *  O Yes  O No					
How will the funds raised be used? Note that any funds raised must be distributed within Australia. *					
Word count: Must be no more than 100	0 words.				

#### Additional information

\* indicates a required field

Is there any additional information or at	tachments to support your application?
Word count: Must be no more than 70 words.	
Supporting attachments Attach a file:	

#### Declaration

The City of Melbourne is committed to protecting your privacy. The information requested in this form is being collected by City of Melbourne for the purposes of assisting with assessment of applications for grants and sponsorship. All information collected is securely stored in SmartyGrants and City of Melbourne computer systems. The personal information will be disclosed to assessment panel members for the purpose of assessing your application. It will not be disclosed to any other external party without your consent, unless required or authorised by law. If the personal information is not collected Council may have difficulties in contacting you in a timely manner in relation to your application. If you wish to alter any of the personal information you have supplied to City of Melbourne please contact Council via telephone on 9658 9658 or complete our online contact form

By submitting an application you consent to Council publishing the successful applicants name, project name and description and the amount funded on our website. This information may also be used for promoting the City of Melbourne's grant program more generally.

If this application is successful you will be required to;

- · comply with the law;
- comply with the venue hire contract and conditions;
- include the City of Melbourne's logo on all promotional materials for the event noting that prior written approval is required for the use of the City of Melbourne's logo;
- pay all other costs associated with the event outside of the CUTHS program; and
- complete an evaluation form within four weeks of the completion of your event.

I declare that the information contained in this application is true and correct and that the application has been submitted with the full knowledge and support of the committee of management of the applicant organisation and/or auspice organisation.

Name *	Title	First Name	Last Name

Position *	
Date *	