

Application Form for Council Resource Support of Events

1. Event and Contact Details

Event Name	<input type="text"/>		
Event Date	<input type="text"/>		
Event Location	<input type="text"/>		
Applicant's Name	<input type="text"/>		
Organisation's Name	<input type="text"/>		
Postal Address	<input type="text"/>		
Telephone	<input type="text"/>	Mobile	<input type="text"/>
Facsimile	<input type="text"/>	Email	<input type="text"/>

2. Events Strategy 2016-2020

How does the event meet the objectives in the Events Strategy 2016-2020? Please outline briefly below.

Does the event receive financial assistance from Council? If yes, please provide details.

3. Insurance

Does the event have insurance to cover any loss or theft of the equipment whilst in your care?

Yes No

If yes, please provide a copy of your Certificate of Insurance.

