

Application Form: 2027 Representative Sports Grant

Form Preview

Applicant Details

* indicates a required field

Please ensure that you have checked the [Australian Sports Directory](#) and located the sport you are wishing to represent. If you cannot find your sport in this directory, we will be **unable to fund your application**.

Please also read the [Funding Guidelines](#) thoroughly before completing this form. Refer to pages 49- 50 for Representative Sport Grant.

Applicant Name *

Title

First Name

Last Name

Please specify age category *

☐ Under 18 years

☐ Over 18 years

Parent or Guardian name

Title

First Name

Last Name

If the applicant is under 18, please provide the name of a parent or guardian

Home Address *

Address

Suburb State Postcode

This must be a resident address with Parramatta Local Government Area

Postal Address (if different from above)

Address

Suburb State Postcode

Mobile Number *

E-mail Address *

Must be an email address

Evidence of residency *

Attach a file:

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Please upload two separate documents displaying your name and the above address to confirm your residency: one showing residency for more than 12 months and one current utility bill (click the link to view accepted documents: <https://www.cityofparramatta.nsw.gov.au/community/grants/representative-sports-grant>).

School or Educational Institution Attending (If Applicable)

This is used for data collection only-it has no impact on the application.

Local Ward *

To identify which ward your address is located in, please refer to the following link and search for your address under Ward Map:: <https://www.cityofparramatta.nsw.gov.au/council/lord-mayor-and-councillors/wards>

Please specify if clicked 'Other'

Bank account details

The bank account into which a Representative Sport Grant will be paid, if successful.

Account name *

Account BSB *

Account number *

Bank Name

Remittance e-mail *

Must be an email address. This is where Council will send the receipt when the payment is made.

Contacting a Council Officer

Before submitting an application, we encourage all applicants to read our Community Grants Guidelines. This will ensure that all required documents and information required have been submitted accordingly. Please contact our Community Grants Officer should you have any questions.

grants@cityofparramatta.nsw.gov.au

[Community Grants Program Guidelines](#)

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Eligibility & Competition Details

* indicates a required field

Your eligibility for this program requires a letter of selection from one of the relevant State or National Sporting bodies or organisation. The letter must include the participant's name, competition details and participations costs. Where flight or accommodation are provided by the sporting organisation, supporting evidence to be included (e.g. flight ticket, hotel reservation with participants name).

If the letter does not outline expenses, then you will be required to provide **proof of costs** associated with participating in this competition.

If your sporting association does not provide insurance coverage for your participation, we require evidence of the insurance coverage you have taken out.

Competition or Championship name *

Enter the exact competition name as shown on your official invitation letter.

Type of Sport

Please specify the type of sport (e.g. soccer, swimming, basketball, athletics, rhythmic gymnastics, etc.).

Sporting organisation represented *

The National Sporting Organisation must be recognised by Sport Australia. Check here: https://www.sportaus.gov.au/australian_sports_directory

Competition start date *

Applicants must submit their application 4 weeks before the start date of the sport event or no later than 4 weeks after the end date of the sport event.

Competition end date *

Must be a date

Competition Description *

Briefly describe the competition, including the venue and location where it is held.

What is your involvement? *

Briefly describe what your participation in the event will be.

Eligibility for this program requires submission of a letter

Attach a file:

Please upload file here

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of selection from a recognised State or National sporting organisation. *

Type of competition *

- ☐ International (up to \$1500)
- ☐ National (up to \$1000)
- ☐ State (up to \$500)

Total costs of participation *

\$

Must be a dollar amount.

Enter amounts in Australian Dollars (AUD) as whole dollars only (no cents).

Please upload file detailing competition costs. Excel Spreadsheets will not be eligible, as we require receipts, invoices, a letter from the sporting body, etc. *

Attach a file:

Expenses must be listed in AUD (e.g. registration fees, travel, accommodation, uniforms/equipment, etc.).

Declaration

* indicates a required field

Privacy & Personal Information Protection Notice

Purpose of collection: In order to assess grant applications received in the City of Parramatta Community Grants Program.

Intended recipients: City of Parramatta Council staff, contractors or consultants appointed for a particular task and City of Parramatta Councillors. Applicant information such as organisation name, project title and amount of project funding allocated by Council will be made publicly available if the applicant is successful in receiving funding.

Supply: A Grant Application is voluntary, however, a completed form is required for City of Parramatta staff, contractors or consultants and Councillors to assess grant applications for funding. Council reserves the right not to assess any application which does not provide sufficient information on an organisation or person's identity in order to sufficiently assess its eligibility for funding.

Access/Correction: Contact the City of Parramatta Council Governance Team to access or correct this information.

Storage: City of Parramatta Council, 126 Church Street, Parramatta NSW 2150. Secure servers of Our Community Pty Ltd, providers of SmartyGrants.

Statement by Supplier

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Successful applicants must complete a **Statement by a Supplier form** before payment can be made. This form is available on the Australian Taxation Office website [here](#).

Please upload completed and signed form *

Attach a file:

Declaration made by or on behalf of the Applicant

The Applicant:

1. Declares the information submitted in this application is, to the best of the Applicant's knowledge, true, and presents fairly, in all material respects, the financial position of the Applicant;
2. Agrees to notify City of Parramatta Council as soon as the Applicant becomes aware of any changes to this information or any circumstances that may affect this application, which includes, but is limited to, information regarding the financial viability of the Applicant;
3. Acknowledges that City of Parramatta Council may seek further information regarding this application, if required;
4. Acknowledges that this is an application only and that the application may not necessarily result in a grant of funding being awarded by City of Parramatta Council, to the Applicant; and
5. Understand and agrees that if the Applicant is successful in making this application, which results in City of Parramatta Council awarding a grant of funding to the Applicant, that it has read and agrees to be bound by, and a party to, the Funding Agreement Standard Terms and Conditions, a copy of which can be found [here](#).

Signature of Applicant (also known as the Grantee, for the purposes of the Funding Agreement Standard Terms and Conditions), agreeing to the above Declaration:

Note: For the avoidance of doubt, by this signature, the Applicant will be bound by, and a party to, the Funding Agreement Standard Terms and Conditions, as the named Grantee in those Funding Agreement Standard Terms and Conditions, if the Applicant's application results in City of Parramatta Council awarding a grant of funding to the Applicant.

Please confirm you understand the above declaration by clicking 'Agreed'

☐ Yes

Name of Applicant

Title First Name Last Name

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Parent/Guardian's Name if under 18

Signature

Please print name

Date of Declaration

Must be a date.

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Remember to SUBMIT your application

If you have completed all questions, click **NEXT PAGE** to review your application. Please remember to hit the **SUBMIT** button. SmartyGrants will alert you if there are compulsory questions that you have not completed.

When you hit submit you will receive a confirmation e-mail. If you do not receive this confirmation, you may not have submitted successfully.

Applicant Feedback

Before submitting, please take a moment to provide feedback—your input helps us improve.

Please indicate how you found the online application process. *

☐ Very Easy ☐ Easy ☐ Neutral ☐ Difficult ☐ Very Difficult

How many minutes in total did it take you to complete this application? *

Estimate in minutes i.e. 1 hour = 60 min

How did you learn out about this grant program? *

We welcome your feedback. Please share any suggestions for improvements or additions to the application process or form. *