

COMMUNITY EVENTS GRANTS

APPLICATION FORM 2026 - 2027

ROUND 1





OFFICIAL

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Contact

City of Albany Privacy Officer

Phone: 08 6820 3000

Email: prisproject@albany.wa.gov.au



COMMUNITY EVENTS GRANT APPLICATION FORM 2026 – 2027 ROUND 1

Please ensure that you have read the City of Albany's Community Grant Guidelines and that you are eligible to apply for this funding.

KEY DATES

Project or Activity Delivered:	1 July 2026 – 31 December 2026
Applications Open:	2 February 2026
Applications Close:	2 March 2026 at 4:00pm
Grant Acquittals	Within six weeks of project completion

Subject to funding allocated the City may release a subsequent round of applications later in the year.

Before submitting an application for this grant, please ensure you have carefully read all details contained in the information pack. Community Events Grants will be competitive, so it is in your interests to ensure your application meets the eligibility criteria, addresses at least one of the funding priorities, and considers the application assessment process.

Applicants **MUST** also discuss their proposed project or activity with the nominated Contact Officer before submitting an application.

KEY CONTACT

To discuss your project, or for other enquiries about Community Events Grants, please contact the City of Albany's Event Coordinator on (08) 6820 3035 or by email on events@albany.wa.gov.au

1. CITY OF ALBANY ACKNOWLEDGEMENT

Which of the following ways are you able to acknowledge the City of Albany's support for the event?
(Please tick all that are relevant).

Acknowledgement of City of Albany support in advertising and media publicity

City of Albany signage at the event

Verbal acknowledgement prior to and during the event

Formal invitations to City of Albany Mayor and/or Councillors to attend event activities, official functions and hospitality opportunities

The Mayor or Councillors to be invited to present the welcome or opening speech at the commencement and/or launch of the Event.

2. APPLICANT DETAILS

Before you start, please contact the Community Events Coordinator to discuss your event application.

Date of discussion:		Officer spoken to:	
Is the applicant an individual or organisation (tick one only):	Organisation Individual – <i>Must be auspiced by an incorporated organisation. Please complete the auspicing body details in Section 4.</i>		
Applicant/Organisation Name:			
Contact Person:		Position:	
Street Address:			
Postal Address: (if different from above)			
Phone:			
Email:			
Website URL:			
What is your preferred method of receiving communication from the City of Albany? (including conditions of grant, grant approvals, and other correspondence)	Email Post		

3. ORGANISATION DETAILS

Please only complete if applying as an ORGANISATION.

Is your organisation incorporated?	Yes. Date incorporated: _____ <i>Please supply a copy of your Certificate of Incorporation with this application.</i> No - Please complete the auspicing organisation details in Section 4.
Does your organisation have an Australian Business Number (ABN)?	Yes. ABN _____ No
Is your organisation registered for GST?	Yes No

4. AUSPICING BODY DETAILS FOR INDIVIDUAL APPLICANTS

Please only complete if applying as an INDIVIDUAL

Auspicing organisation's name:	
Contact person:	
Postal Address:	
Phone:	
Email:	
Is the auspicing organisation registered for GST?	Yes No
Is the applicant or auspicing organisation covered by public liability insurance?	Yes. Coverage amount: _____ <i>Please supply a copy of your Public Liability Insurance with this application.</i> No

5. BANK DETAILS

Please provide details of your organisation's OR auspicing organisations main operating account. If your application is successful, this will be the account to which grant funding is paid.

BSB number:	
Account number:	
Bank:	
Account name:	

6. EVENT DETAILS

Event Title:

Event Summary:

(50 words or less. The information supplied here will be used by the City to describe the project to the public where applicable).

Event Start Date:

Event End Date:

What is the location where your event will take place?

Which of the funding objectives does your project address:

(May tick more than 1).

Have a positive impact on the vibrancy, diversity of activity and liveability of Albany.

Contribute positively to the image and social connectivity of Albany.

Enhancing community engagement and participation with events and promote social inclusion, diversity and community participation.

Which Albany 2026 strategic theme does your project address:

(May tick more than 1).

Reflect authentically on the past.

Toast the present.

A future where anything is possible.

Funding Requested (excluding GST):

Total Event Cost (excluding GST):

Estimated total number of visitors:
(E.g. ticketholders, spectators etc.)

7. EVENT DESCRIPTION

If you require more space, please attached a single A4 page, Arial 11-point font, single-spaced.

What does your event aim to achieve?

Who is involved – communities, participants, stakeholders, population groups?

How does the event align with the identified funding priorities?

How do you propose to deliver your event?
(consider – governance, resourcing, budget, operations, logistics, timeline?)

How will you determine if your event was a success?

In 100 words or less, describe how your event aligns with the 2026 vision and a 2026 strategic theme.

8. BUDGET

Outline the budget details of your event using the Income and Expenses tables below. All budget details must be completed using the tables below. Budgets submitted as separate items attached will not be assessed.

INCOME

Note: 'In-Kind' contributions are goods, services, time, expertise, or other non-cash contributions which assist the development, delivery and/or evaluation of the event.

	Amount \$ (excluding GST)
City of Albany contribution <i>(This is your \$ request for funding from the City of Albany)</i>	
Your contribution <i>(This is your organisations \$ contribution to the event)</i>	
Other contributions <i>(This is other \$ income streams for the event - sponsorship, funding, ticket sales, vendor fees, other)</i>	Sponsorship/Funding:
	Ticket sales:
	Vendor fees:
	Other income:
Total \$ of all contributions <i>(Total of City of Albany contribution, your contribution and other contributions)</i>	Total:
Total of 'In Kind' contributions <i>(Total \$ value of any In Kind support from you or other organisations to deliver the event - estimated \$ value)</i>	Total:

EXPENSES

Please outline your project's total expenses using the table below.

[illegible]

9. PREVIOUS FUNDING

Has your organisation received funding from the City of Albany in the past five years?

Yes

No

If yes, please provide details

Year	Purpose	Amount

10. APPLICANT DECLARATION

I, the undersigned, certify that I have been authorised to submit this application and that the information contained herein or in the attachments is, to the best of my knowledge, true and correct.

Name:

Signature:

Position:

Date:

11. CHECKLIST

Please ensure you have:

- ☐ Read the application guidelines carefully.
- ☐ Discussed your proposed event with the delegated Officer.
- ☐ Confirmed you or your organisation meets the eligibility criteria.
- ☐ Developed an event that aligns with at least one of the funding priorities.
- ☐ Completed ALL sections of the Application Form (including project detail and budget).
- ☐ Attached a copy of Public Liability Insurance.
- ☐ Attached Certificate of Incorporation (if relevant).
- ☐ Any attachments to support this application (please specify): _____