

# Fee Support: Application Form

## Form Preview

### Fee Support details

\* indicates a required field

Fee Support is available to eligible applicants for the following Council facilities and services:

- Indoor venues (community centres and halls)
- Open spaces (beaches, parks and reserves)
- Street banners
- Road closures
- Waste services
- Lifeguard services
- Nursery (plant donations)

**Quote required:** Applicants need to contact the relevant Council department to obtain a quote for their requested venue, facility or service **prior to submitting an application** for fee support.

**Do you have a quote for your requested venue, facility or service? \***

- Yes  
 No

**Name of the Council venue, facility or service \***

Organisation Name

**Date of booking/s \***

**What is the total cost of the venue, facility or service for which you are requesting a fee waiver? \***

Must be a dollar amount and no more than 10000.

**Please upload the quote you have received \***

Attach a file:

### Booking Required

**You are unable to complete an application until you have booked and received a quote from the relevant Council department.**

**NB: Allow up to 14 days to receive this quote.**

For information and booking of Council venues, please call the numbers below:

# Fee Support: Application Form

## Form Preview

- Community halls: **1300 722 542**

Venues included:

- - Burnie Park Community Centre
  - Clovelly Senior Citizens Centre
  - Coogee East Ward Senior Citizens Centre
  - Kensington Park Community Centre
  - Maroubra Senior Citizens Centre
  - Totem Hall
- Randwick Community Centre: **9093 6200**
- Randwick Literary Institute: **9093 6140**
- Randwick Town Hall: **9093 6827**
- Library venues (meeting rooms & exhibition spaces): **9093 6400**

**For all other facilities and services, please contact Customer Service on 1300 722 542 or email [council@randwick.nsw.gov.au](mailto:council@randwick.nsw.gov.au).**

## Partial Fee Support

The Fee Support program has a limited annual budget. Due to the high volume of applications received, Council cannot always offer the full amount requested.

**Are you willing to accept a discount only (partial waiver)?**

- Yes  
 No

**Partial waiver amount**

\$

Must be a dollar amount.

The minimum amount of funding you will accept.

## Applicant details

\* indicates a required field

**Name of organisation \***

Organisation Name

**Contact person \***

Title      First Name      Last Name

          

**Phone number \***

# Fee Support: Application Form

## Form Preview

Must be an Australian phone number.

### Email address \*

Must be an email address.

### Postal address \*

Address

  

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.  
Must be a street address or PO box.

### Website

Must be a URL.

### Applicant ABN

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

## Demographic information

**Does your organisation work primarily with certain identity or interest groups? This question will assist Council to determine equity of access to funded projects across Randwick's diverse community. \***

- |   |  |
|---|--|
| <input type="checkbox"/> Women              | <input type="checkbox"/> Culturally and linguistically diverse communities |
| <input type="checkbox"/> Men                | <input type="checkbox"/> People with disability                            |
| <input type="checkbox"/> LGBTQIA+ community | <input type="checkbox"/> People with mental health conditions              |

# Fee Support: Application Form

## Form Preview

- Children or young people
- Older people
- Aboriginal and/or Torres Strait Islander people
- People experiencing homelessness
- People experiencing domestic and family violence
- People experiencing financial hardship

## Eligibility

**Organisation type: Only certain categories of applicants are eligible for Fee Support. Please indicate your eligibility type from the list below. \***

- Not-for-profit organisation
- Association or other non-profit community group
- Social enterprise
- Sole trader auspiced by a not-for-profit organisation (Community Connect only)
- Sole trader operating in the creative arts and cultural sector (Community Creative only)
- Creative arts organisation (Community Creative only)
- Private company (Community Creative only - the proposed activity must be not-for-profit)
- None of the above

**Local connection: Is your organisation located within the boundaries of Randwick Local Government Area (LGA)? \***

- Yes
- No

**If your organisation is located outside Randwick, please provide a brief explanation of your local connection. E.g., the proportion of serviced clients that are residents of the LGA, or your intention to conduct the activity within the Randwick area.**

Word count:

Must be no more than 150 words.

**Financial need for reduced fees: Please indicate your organisational size (based on annual revenue for the last financial year): \***

- Small (annual revenue under \$500,000)
- Medium (annual revenue over \$500,000, but less than \$3 million)
- Large (annual revenue of \$3 million or more)

**Fee Support is allocated on a priority needs basis. Please provide any further information to support your organisation's financial need for reduced fees. \***

Must be no more than 150 words.

## Ineligible

One or more of your answers indicate that you are not currently eligible for Fee Support. Please contact Randwick Council on **1300 722 542** to discuss your options.

# Fee Support: Application Form

## Form Preview

### Project Details

\* indicates a required field

**Project/activity title \***

**Location - where will this activity/project take place? \***

**Provide a brief summary of the project/activity \***

Word count:

Must be no more than 150 words.

**How many people do you expect to attend/benefit from the project, event or activity? \***

Must be a number.

**Will there be an entry fee, charge or other cost to participants? \***

- Yes  
 No

**The amount you will charge per person to participate in your project/activity**

\$

Must be a dollar amount.

### Assessment criteria

\* indicates a required field

#### Alignment with a Community Investment Program stream

Applicants are only eligible for Fee Support if their proposed activity is not-for-profit and relates to the aims of either the **Connect** or **Creative** funding streams of the Community Investment Program.

The [Community Connect](#) stream aims to foster social inclusion by increasing levels of community participation, belonging, understanding, volunteering and healthy lifestyle activities.

The [Community Creative](#) stream aims to increase Randwick's reputation in the arts sector, activate creative and cultural spaces, encourage innovation and foster community participation in the arts and cultural life of Randwick City, including through the contribution of First Nations people.

# Fee Support: Application Form

## Form Preview

**Which funding stream does your activity/project relate to? \***

- Community Connect
- Community Creative

**Please describe the experience, skills, knowledge and sector expertise that you/your organisation will apply to deliver the activity or project. \***

Community Connect

**Please describe how your project will foster social inclusion in Randwick by increasing levels of community participation, belonging, understanding, volunteering and/or healthy lifestyle activities. \***

Community Creative

**Please describe how your project will support the growth and innovation of the Randwick arts sector by activating creative and cultural spaces, encouraging innovation, and fostering community participation in the arts and cultural life of Randwick City. \***

## Declaration and assessment

\* indicates a required field

### Declaration

I confirm that to the best of my knowledge, the information recorded in this application is correct at the time of submission.

I confirm that an application being made on behalf of an organisation has the approval of that organisation's management or authorised person.

**Name of person submitting this application \***

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

### Assessment

Thank you for your application for Fee Support.

# Fee Support: Application Form

## Form Preview

Council staff will assess your application and provide a written response within 10 working days.