### IAG Commonwealth & Olympic Games Application Form

### Introduction

\* indicates a required field

This grant provides support to residents of the Moreton Bay region who have been invited to represent their field at either the Commonwealth or Olympic Games.

Please read the Guidelines carefully before commencing and submitting this application. Click here to read the grant guidelines.

Please note that most fields in this form are mandatory and if not completed your form will not be able to be submitted. An error message will highlight which questions require completion.

#### I have read and understand the Individual Achievement Grant guidelines \*

○ Yes

O No - please read the Guidelines prior to starting an application

#### **SUPPORTING DOCUMENTATION REQUIRED**

When applying for an Individual Achievement Grant, ensure you supply the following documentation:

- Proof of residency within the Moreton Bay Region; and
- Written confirmation of the applicant's selection stating the applicant's name and confirming their representation at the event.

### **Applicant Details**

Applicant *			
First Name	Last Name		
Primary Address * Address			
Address Line 1, Suburb/T	own, State/Province, ar	d Postcode are required. C	ountry must be Australia
Phone Number *			
Filone Number			
Must be an Australian ph	one number.		
Email Address *			

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<b>Are you a permanent resident of the Moreton Bay Region? *</b> O Yes						
No - you are not eligible to apply for this grant. Please do NOT submit an application.						
Proof of residency * Attach a file:						
E.g. Rates notice, car registration or phone bill.						
Are you under 18 years of age? *  O Yes O No						
Guardian Details						
If the applicant is younger than 18 years of age the details of a parent/guardian must be provided.						
Parent / Guardian *						
First Name Last Name						
Relationship to applicant *						
Primary Address Address						
Any, but at least one field is required.						
Phone Number *						
Must be an Australian phone number.						
Email *						
Previous Funding						
Have you received an Individual Achievement Grant this financial year? *  O Yes  O No  O Unsure						

Individuals are eligible to receive a maximum of two Individual Achievement Grants per financial year.

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If yes, provide details of all applications submitted *
Word count:
Event Details
Which event are you representing Australia at? *  Commonwealth Games  Special Olympics World Games  Olympic Games - Summer  Olympic Games - Winter  Olympic Games - Paralympics  Olympic Games - Youth Olympics
Event Start Date *
Event End Date *
Applications are accepted up to six months before or three months after the event.
Event Location *
City & State or Country if overseas e.g. Sydney, NSW
Event Venue *
E.g. Olympic Park Athletic Centre
How did you qualify for this event? *
Describe how the grant will contribute towards the event related expenses *
Written confirmation must include the following information: *  □ A recognised national or state sporting organisation □ Applicant's name
☐ Confirmation of representation at the event  At least 3 choices must be selected.
Please check each box to confirm your letter includes ALL required information. If the letter doesn't include this information you may not be eligible for funding.

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Written confirmation of your selection * Attach a file:	
Payment Details	
If you are successful in being awarded funding und Council will transfer the funds to your nominated by	
Account Holder Name *	
Bank Name *	
BSB *	
XXX-XXX (i.e.123-456)	
Account Number *	
A copy of your bank statement header is requ Account Name, BSB and Account No. * Attach a file:	ired. This copy should show the
Note: Please ensure that you complete all sec and attach all requested documentation. Inco considered for funding.	
Certification	
I certify that to the best of my knowledge, the infor supporting documentation) is true and correct.	mation detailed in this application (and
Applicant Name *	
Date *	

**Guardian Certification** 

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If the applicant is under 18 years of age, the parent/guardian of the application must also sign this certification.

I certify that to the best of my knowledge, the information detailed in this application (and supporting documentation) is true and correct.

Gı	uardian	Name	*	
Da	ate *			

### **Privacy Statement**

Moreton Bay Regional Council is collecting your personal information for the purpose of assessing your grant application and/or finalising your grant application requirements. Council will use your personal information to update Council's customer information records and to contact you about other functions and services of Council. Your information will not be given to any other person or agency unless you have given us permission or we are required by law.

### Submit

You are now ready to submit. Read and acknowledge the message below, then click on 'Next page' to review, then Submit. \*

O You will receive a confirmation email when your application has been submitted. If you do not receive this email then your application has NOT been submitted. Please ensure all questions have been answered and try again. (Check box here to acknowledge that you understand this)