

# Attachment 2 to Item 12.1 Town of Port Hedland

**Community Funding & Donations Application** 

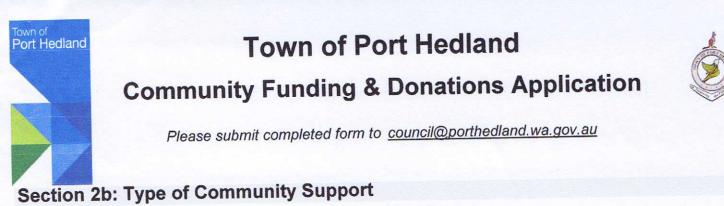


Please submit completed form to council@porthedland.wa.gov.au

#### Section 1d: Authorisation

I certify that the information provided on this application is correct to the best of my knowledge and that I am authorised to apply for funding on behalf on this community organisation/ individual. If successful, I will acquit the funds received before the end of the financial year in which they were received.

I will dequit the fullae is				
Full name:	Britt G	hiddy.		Date: 31114
Signed:	Btu	ij.		Date. String
Section 2a: Applic	ation Details			
What is the name of y	our Project / Ev	vent:		
WA Little	League -	Tar -	South Afric	ca / Hong Kong.
Provide a brief outlin	e of your projec	t / event and w	hat you would like	to achieve.
Blen has be	er seledt	ed to r	epresent WA	t in this tourname
the same and	ed while	1 rompe	ting in the	= state + nationo
te was spon	and as	a result	1 offered +1	nis position, made
up of pro	niong u	prof &	saseballes	5 -
Outline how ToPH fu	inding will speci	ifically be used	l.	
The cost	= of -1"	he tr	ip is s	BS540-20,
Covering fligt	ts, alcomm	edation -	t transfers	- All mone-)
will be paid	dredly of	f this	muoice	
un a peno		2.	d hu the Tewn's F	unding & Donations Policy
Has this project or e	vent previously	been supporte	a by the rowns r	unding & Donations Policy?
Yes	No			
If Yes, in which year	? _			
Please provide deta	ils: _			
Not: S.P.	saves de	ccs end	1 invoice - leter of	offer.



## Which type(s) of community support are you seeking (refer to policy 6/003):

Establishment Funding (max \$2,000 cash)	
Periodical Funding* (max \$1,000 cash)	
In-kind Contributions	
Waiver of Fees	
Development of Talented Local People (max \$500)	

\* provide evidence of 50% cash contribution from applicant organisation.

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## Section 2c: Funding Details

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Details of funds from applicant:

0)

Detail the amount of each type of funding requested from contributing parties:

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	Contributed by Applicant	Contributed by Other Funding Sources	Requested to be contributed by ToPH
Cash (max \$2,000 by ToPH)	\$	\$	\$
Venue fees funded	\$	\$	\$
In-kind contributions*	\$	\$	\$
Total (max \$5,000 by ToPH)	\$	\$	\$

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\* refer to Policy 6/003 for eligible criteria and provide details of in-kind requested (i.e. bins, vehicle usage, mowing, etc)

#### **Section 3: Recognition**

Detail how the funding / support from the Town of Port Hedland will be recognised :

10001 tion attactive 15 2 to lic TOPH

Port Hedland <b>Community Funding &amp; Donations Application</b> Please submit completed form to <u>council@porthedland.wa.gov.au</u>
Section 1a: Applicant Details
Identify who is applying for this funding:
Individual Person Community Organisation Not For Profit
Organisation/Individual Name: BEN GIDDM
Contact Person: BRITT GIDD-1.
Position within Organisation: Mother
Postal Address: PO Box 2089 Stn Hedland Postcode: 6722.
Telephone: 0458 216167 Email: rjgiddy@gmail.com
Applicants are requested to complete ALL sections relevant to their application.
Section 1b: Organisation Details
Incorporated: Yes No Year of Incorporation:
If Yes, please attach a copy of your Certificate of Incorporation
ABN:
Registered for GST: Yes No
Section 1c: Public Liability Insurance
Does your organisation have Public Liability Insurance: Yes No
If No, are you/your organisation covered under another association (e.g. State Sporting Association)?
Yes No If yes, by who?
If No, will you/your organisation be obtaining cover for this event?
Yes No If yes, by who?

#### **Hedland Excavation**

David Hayes <walittleleague@gmail.com> Saturday, 5 October 2013 11:57 AM rjgiddy@gmail.com Little League tour 2014 - Hong Kong and South Africa - Ben GIDDY LLWA-LLtour-2014-Page1.docx; LLWA-LLtour-2014-Page2.docx; LLWA- LLtour-2014-Page3.docx</walittleleague@gmail.com>

Categories:

Britt

Hello Ben and family,

On behalf of coaches Glen Tovey, Stuart Johnson and Craig Lewington, it gives me the absolute greatest of pleasure to invite you to be a part of our Little League tour of South Africa and Hong Kong 2014. The tour is the only official Baseball WA Little League international trip.

In addition, this is likely to be a special once-off Little League trip to South Africa making it extra special. As you may be aware, we usually tour Dubai but given a clash of schedules, we have entered the South African tournament as replacement.

This is such an exciting opportunity for WA Little Leaguers to display their talents on an international stage competing against some of the world's best players and is the third year in a row we have run this tour which is getting bigger and better each time.

We are pleased to confirm that Ben has been reserved a position in the Majors tour squad, having been identified as one of the best Little Leaguers in WA.

However, as you can appreciate we only have a limited amount of time to finalise the team - and limited spots in the team. As such, we seek your assistance by responding no later than <u>October 19th 2013</u> - either booking your place by returning the acceptance form (attached) or letting us know that we can offer the place to someone else.

If you have any questions feel free to ring or email anyone of us and we would be happy to help.

We look forward to hearing from you soon

David Hayes Little League District Administrator Baseball WA & Softball WA

www.littleleaguewa.org.au

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COPY

No virus found in this message. Checked by AVG - <u>www.avg.com</u> Version: 2013.0.3408 / Virus Database: 3222/6715 - Release Date: 10/01/13

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## STATEMENT OF ACCOUNT

for you!

SOUTH AFRICA AND HONG KONG LITTLE LEAGUE

BRITT

				and the second se
SERVICE	AMOUNT EXC GST	AMOUNT TAX / LEVY	AMOUNT GST	AMOUNT INC GST
Cape Town and Hong Kong Twin Share cost 22APR14 2 x \$4,697.00	\$9,394.00	\$2,206.00	\$0.00	\$11,600.00
Travel Insurance 1 x \$240.00	\$240.00	\$0.00	\$0.00	\$240.00
TOTAL	\$9,634.00	\$2,206.00	\$0.00	\$11,840.00
NON REFUNDABLE DEPOSIT AND INSURANCE DUE WITHIN ON OR BEF	ORE 3 DECEME	3ER, 2013		\$3,240.00
BALANCE DUE ON OR BEFORE 28 FEBRUARY,	2014			\$8,600.00
A WEEKLY/FORTNIGHTLY/MONTHLY PAYMENT	PLAN CAN BE I	MPLEMENTED		
CREDIT CARD PAYMENT WILL INCUR A 2% CRE				

#### DISNEYLAND OPTION IF CHOSEN

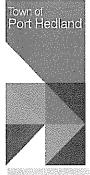
DIRECT DEPOSIT DETAILS BANK ACCOUNT DETAILS

Account Name:Ridgelake Holdings Pty. Ltd.Account BSB:036 078Account No.:430822Bank:Westpac

COPY

\$300.00

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Port Hedland	Town of Port Hedland					
Com	munity	Funding	& Dona	tions Ap	plication	
PI	'ease submit d	completed form	to <u>council@</u>	porthedland.wa	<u>a.gov.au</u>	
Section 1a: Applica		en de la color de la color Color de la color de la colo				
Identify who is applying	for this fund	ding:		[]		
Individual Perso	on 🛛 🗙	Commu	unity Organi	isation	Not F	or Profit
Organisation/ Individu	ual Name:	JOSHUA TA	YLOR			
Contact Person:		I	DAWN HUN	TER		
Position within Organ	isation:	MOTHER				
Postal Address:		POBOX 30	87 SOUTH	HEDLAND	Postcode:	6722
Telephone:	437806114	ļ	Email:	dawn.hunter	@pilbara.wa.	<u>edu.au</u>
Applicants are	e requestea	l to complete	ALL section	ns relevant to	o their applic	cation.
Section 1b: Organi	sation De	tails	an an Santa Santa Santa Santa Santa Sant			(dagan ( ) aga ay nagal ganggayan ( ) Ang ang ang ang ang ang ang ang ang ang a
Incorporated:	Yes	No		Year of Inco	rporation:	
If Yes, please attach a	copy of your	Certificate of	Incorporatio	'n		
ABN:				_		
Registered for GST:		Yes	No	]		
Section 1c: Public	Liability li	nsurance				
Does your organisatio	on have Pub	olic Liability I	nsurance:	Yes 🗙	No	
If No, are you/your org Association)?	janisation c	overed unde	r another as	ssociation (e.	g. State Spo	rting
Yes 🛛	No 🗌	lf yes, b	y who?	baseball Aus	tralia	
If No, will you/your or	ganisation <b>k</b>	be obtaining	cover for thi	is event?		
Yes	No 🗌	lf yes, b	y who?	****		4- 1010



**Community Funding & Donations Application** 



Please submit completed form to council@porthedland.wa.gov.au

#### Section 1d: Authorisation

I certify that the information provided on this application is correct to the best of my knowledge and that I am authorised to apply for funding on behalf on this community organisation/ individual. If successful, I will acquit the funds received before the end of the financial year in which they were received.

Full name:	DAWN HUNTER			
Signed:	Delent	Date:	11/2/2014	

Section 2a: Application Details

What is the name of your Project / Event:

southeast asia youth baseball and softball youth tournamant

Provide a brief outline of your project / event and what you would like to achieve.

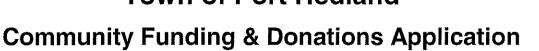
Joshua is a chosen team member in the under 13 western australian baseball team.

travelling to manilla to compete against 3 other countries, in a week long tournament.

Outline how ToPH funding will specifically be used.

#### to assist the cost of the trip, including the return flights , accommodation, meals and uniforms

Has this project or event previous	ly been supported by the Town's Funding & Donations Policy?
Yes X No	
If Yes, in which year?	
Please provide details:	not that I am aware of





Please submit completed form to council@porthedland.wa.gov.au

#### Section 2b: Type of Community Support

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#### Which type(s) of community support are you seeking (refer to policy 6/003):

Establishment Funding (max \$2,000 cash)	
Periodical Funding* (max \$1,000 cash)	
In-kind Contributions	
Waiver of Fees	
Development of Talented Local People (max \$500)	500

\* provide evidence of 50% cash contribution from applicant organisation.

#### Details of funds from applicant: <u>I have paid the tournament fee's.</u> We will still have to pay for flights from Port Hedland to perth and return. Also pay for player pants /belt and lunch time meals .

#### Section 2c: Funding Details

Detail the amount of each type of funding requested from contributing parties:

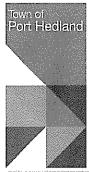
	Contributed by Applicant	Contributed by Other Funding Sources	Requested to be contributed by ToPH
Cash (max \$2,000 by ToPH)	\$	\$	\$
Venue fees funded	\$	\$	\$
In-kind contributions*	\$	\$	\$
Total (max \$5,000 by ToPH)	\$	\$	\$

\* refer to Policy 6/003 for eligible criteria and provide details of in-kind requested (i.e. bins, vehicle usage, mowing, etc)

#### Section 3: Recognition

Detail how the funding / support from the Town of Port Hedland will be recognised :

the funding would be greatly appreciated by Joshua and myself to assist him to particiapate in the line of the second sec







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Please submit completed form to council@porthedland.wa.gov.au

## Section 4: Application Criteria / Checklist

Please ensure the application meets all criteria below:

- a. Applicant has read, understood and acknowledged the conditions and eligibility requirements contained in Policy 6/003 'Community Funding & Donations'
- b. The positive contribution the event or project will make to the Hedland community
- c. The information requested meets the requirements of this policy
- d. The applicant certifies within the application that they are authorised to apply for Town of Port Hedland support and to represent the applicant organisation
- e. The applicant certifies that the information contained within the application is true and accurate, with commensurate evidence / documentation able to be provided on request from the Town
- f. Sufficient financial information has been provided to clearly identify the items on which monies will be spent, their discrete costs and their importance to the success of the event or project
- g. The level of resource contribution to be made by the applicant, relative to their capacity to do so, as well as the accessibility of funds from other sources.

Perth Allstars Group Division of S.E.A.Y.B. & S.T. (South East Asia Youth Baseball & Softball Tournament) Postal Address: 4 Linville Street, , FALCON, WA 6210 Phone: 9534-3335 Fax: 9531-4451 Email: <u>perthallstars@bigpond.com.au</u>



We would like to congratulate Josh Taylor on being selected as part of

#### The Perth Allstars Squad

The Tournament will be played in Manilla March 24th through to March 30<sup>th</sup> 2014

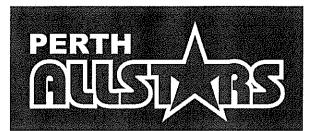
Teams will be travelling from Bangkok, Jakarta, Singapore, and to compete in the tournament.

Age groups competing are: Under 13 / 15 and Under 19 Baseball and Softball.

You will need to organise time off from school / or work for the above dates.

Please feel free to use this letter to assist you to obtain sponsorship for yourself for the Tournament.

Regards Caron Nichols Perth Allstars



4 Linville Street. FALCON WA 6210

email:perthallstars@bigpond.com.au

Caron:(08) 9534-3335, M:0400-708-461 Cheryl:0417-900-883

Bill To:

Joshua U13B - TAYLOR C/- Under 13 Baseball Manila 2014 Invoice #:00000138

Date:20/12/2013

Description

SEAYB&ST 2014 - Manila Trip - 22nd March - 30th March 2014

Amount

- Airline Travel	\$1,100.00
- Hotel - Twin Share	\$580.00
- Full Uniform Kit	\$540.00
- Meal Money	\$150.00
- Transfer Fees - Bus	\$100.00
- Player Laundry	\$80.00
- Coaches and Players Levy	\$400.00
- Wind - Up	\$40.00

BANK ACCOUNT DETAILS	SUB TOTAL:	\$2,990.00
PERTH ALLSTARS - BSB:633-000 Account: 1470-72748 please email receipts to cabooks@westnet.com.au	AMOUNT PAID:	\$700.00
All queries relating to invoices - Please contact Cheryl email: cabooks@westnet.com.au	BALANCE DUE:	\$2,290.00

	munity F	-		and the
Section 1a: Applic	ant Details	5		
Identify who is applying	g for this fund	ling:		
Individual Perso	on x	Community Org	ganisation	Not For Profit
Organisation/ Individ	ual Name:	Jack Bowins		
Contact Person:		Michell e Bowins		
Position within Organ	nisation:	Mother of Jack Bowir	IS	
Postal Address:	4 Clark stree	et Port Hedland	Pos	stcode: <u>6721</u>
Telephone:	417768332	Emai	I: <u>mark_michelle@v</u>	wn.com.au
Applicants a	re requested	to complete ALL see	ctions relevant to the	eir application.
Section 1b: Organ	isation Det	tails		
Incorporated:	Yes	No	Year of Incorpor	ation:
lf Yes, please attach a	copy of your	Certificate of Incorpor	ration	
ABN:				
Registered for GST:		Yes No		
Section 1c: Public	: Liability Ir	nsurance		
Does your organisati	on have Pub	lic Liability Insuranc	e: Yes 🗌 N	lo
If No, are you/your or Association)?	ganisation c	overed under anothe	er association (e.g. S	tate Sporting
Yes	No 🗌	If yes, by who?		
If No, will you/your organisation be obtaining cover for this event?				
	gamsation	be obtaining cover to	r this event?	

**Town of Port Hedland** 

## **Community Funding & Donations Application**



Please submit completed form to council@porthedland.wa.gov.au

#### Section 1d: Authorisation

I certify that the information provided on this application is correct to the best of my knowledge and that I am authorised to apply for funding on behalf on this community organisation/ individual. If successful, I will acquit the funds received before the end of the financial year in which they were received.

Full name:	Michelle Bowins		
Signed:	Michelle Bowins	Date:	14/02/2014

#### **Section 2a: Application Details**

#### What is the name of your Project / Event:

Financial contribution for a talented athlete.

Provide a brief outline of your project / event and what you would like to achieve.

Ρ	lease	see	section	2B

Outline how ToPH funding will specifically be used.

The funding will be used to purchase the required team uniforms and accessories.

All other costs will be funded by Jack.

The uniform and accessories cost are approximately \$500.00 per trip.

Has this project or event previously been supported by the Town's Funding & Donations Policy?

Yes

x	No
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If Yes, in which year?

Please provide details:





**Community Funding & Donations Application** 

Please submit completed form to council@porthedland.wa.gov.au

#### Section 2b: Type of Community Support

#### Which type(s) of community support are you seeking (refer to policy 6/003):

Establishment Funding (max \$2,000 cash)	
Periodical Funding* (max \$1,000 cash)	
In-kind Contributions	
Waiver of Fees	
Development of Talented Local People (max \$500)	\$500.00

\* provide evidence of 50% cash contribution from applicant organisation.

Details of funds from applicant: Jack has been invited by the WA Little league baseball to attend

a Little League baseball tour of South Africa and Hong Kong in April and also was selected in

the U 13 Perth all stars baseball team to compete in Manila in the South East Asia youth Baseball

and Softball tournament. Thus we would like to seek a financial contribution to assit with the cost of the purchase of uniforms and equipment for both trips. Travel and accommodation components will be funding by Jack. Please see enclosed invitation

With these opportunities Jack can pass his experieces onto fellow junior baseball players in Hedland.

#### **Section 2c: Funding Details**

#### Detail the amount of each type of funding requested from contributing parties:

	Contributed by Applicant	Contributed by Other Funding Sources	Requested to be contributed by ToPH
Cash (max \$2,000 by ToPH)	\$	\$	\$
Venue fees funded	\$	\$	\$
In-kind contributions*	\$	\$	\$
Total (max \$5,000 by ToPH)	\$	\$	\$

\* refer to Policy 6/003 for eligible criteria and provide details of in-kind requested (i.e. bins, vehicle usage, mowing, etc)

#### **Section 3: Recognition**

Detail how the funding / support from the Town of Port Hedland will be recognised : Acknowledgement by Jack and a media article.





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**Community Funding & Donations Application** 

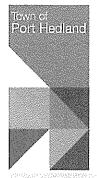
Please submit completed form to council@porthedland.wa.gov.au

#### Section 4: Application Criteria / Checklist

Please ensure the application meets all criteria below:

- a. Applicant has read, understood and acknowledged the conditions and eligibility requirements contained in Policy 6/003 'Community Funding & Donations'
- b. The positive contribution the event or project will make to the Hedland community
- c. The information requested meets the requirements of this policy
- d. The applicant certifies within the application that they are authorised to apply for Town of Port Hedland support and to represent the applicant organisation
- e. The applicant certifies that the information contained within the application is true and accurate, with commensurate evidence / documentation able to be provided on request from the Town
- f. Sufficient financial information has been provided to clearly identify the items on which monies will be spent, their discrete costs and their importance to the success of the event or project
- g. The level of resource contribution to be made by the applicant, relative to their capacity to do so, as well as the accessibility of funds from other sources.

	munity	Attachment 5 to Item 12.1 <b>Town of Port Hedland</b> <b>Funding &amp; Donations Application</b> t completed form to <u>council@porthedland.wa.gov.au</u>	
Identify who is applying		angen an eine eine eine dat daren eine eine eine eine eine eine eine e	90101 03 (143) 90101 03 (143)
Individual Perso	on x	Community Organisation Not For Profit	
Organisation/ Individu	ual Name:	JAKE TAYLOR	
Contact Person:		DAWN HUNTER	
Position within Organ	isation:	MOTHER	
Postal Address:	******	P O BOX 3087 SOUTH EHDLAND Postcode: 6722	
Telephone:	437806114	4 Email: <u>dawn.hunter@pilbara.wa.edu.au</u>	
Applicants ar	e requested	d to complete ALL sections relevant to their application.	
Section 1b: Organ	isation De	etails	
Incorporated:	Yes 🗸	No Year of Incorporation:	
lf Yes, please attach a	copy of your	Ir Certificate of Incorporation Boseball	
ABN:			
Registered for GST:		Yes No	
Section 1c: Public	Liability II	Insurance	
Does your organisation	on have Pub	blic Liability Insurance: Yes √ 📝 No 🗌	
If No, are you/your or Association)?	ganisation c	covered under another association (e.g. State Sporting	
Yes	No 🗌	If yes, by who?	
If No, will you/your or	ganisation b	be obtaining cover for this event?	
Yes	No 🗌	If yes, by who?	



**Community Funding & Donations Application** 



Please submit completed form to council@porthedland.wa.gov.au

#### Section 1d: Authorisation

I certify that the information provided on this application is correct to the best of my knowledge and that I am authorised to apply for funding on behalf on this community organisation/ individual. If successful, I will acquit the funds received before the end of the financial year in which they were received.

Full name:	Dawn Hunter		
Signed:	D. Hunt-	Date:	10/03/2014

Section 2a: Application Details

What is the name of your Project / Event:

Perth Heat Colts USA tour

Provide a brief outline of your project / event and what you would like to achieve.

Jake has been chosen as a team member in the state Perth Heat

colts tour to USA ,

Outline how ToPH funding will specifically be used.

The funds will assist in the tour costs, airfares, accommodation and meals.

Has this project or event previously been supported by the Town's Funding & Donations Policy?

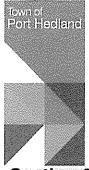
\_ Yes



If Yes, in which year?

Please provide details:

not that I am aware of.



**Community Funding & Donations Application** 



Please submit completed form to council@porthedland.wa.gov.au

## Section 2b: Type of Community Support

#### Which type(s) of community support are you seeking (refer to policy 6/003):

Establishment Funding (max \$2,000 cash)	
Periodical Funding* (max \$1,000 cash)	
In-kind Contributions	
Waiver of Fees	1
Development of Talented Local People (max \$500)	V

\* provide evidence of 50% cash contribution from applicant organisation.

Details of funds from applicant:

the tour cost is approximately \$5900 plus meals

# Section 2c: Funding Details

#### Detail the amount of each type of funding requested from contributing parties:

	Contributed by Applicant	Contributed by Other Funding Sources	Requested to be contributed by ToPH
Cash (max \$2,000 by ToPH)	\$	\$	\$
Venue fees funded	\$	\$	\$
In-kind contributions*	\$	\$	\$
Total (max \$5,000 by ToPH)	\$	\$	\$

\* refer to Policy 6/003 for eligible criteria and provide details of in-kind requested (i.e. bins, vehicle usage, mowing, etc)

Section 3: Recognition

#### Detail how the funding / support from the Town of Port Hedland will be recognised :

Acknowlegement of the good work the TOPH does with sporting facilities and the talent of the youth in Hedland and the junior baseball association



## Town of Port Hedland Community Funding & Donations Application



Please submit completed form to council@porthedland.wa.gov.au

Section 4: Application Criteria / Checklist Please ensure the application meets all criteria below:

- a. Applicant has read, understood and acknowledged the conditions and eligibility requirements contained in Policy 6/003 'Community Funding & Donations'
- b. The positive contribution the event or project will make to the Hedland community
- c. The information requested meets the requirements of this policy
- d. The applicant certifies within the application that they are authorised to apply for Town of Port Hedland support and to represent the applicant organisation
- e. The applicant certifies that the information contained within the application is true and accurate, with commensurate evidence / documentation able to be provided on request from the Town
- f. Sufficient financial information has been provided to clearly identify the items on which monies will be spent, their discrete costs and their importance to the success of the event or project
- *g.* The level of resource contribution to be made by the applicant, relative to their capacity to do so, as well as the accessibility of funds from other sources.

Hello all,

## RE: 2014 PERTH HEAT WESTERN AUSTRALIAN STATE BASEBALL WINTER TOUR TO USA

On behalf of Baseball WA and the Perth Heat Colts, I would like to officially congratulate you on your automatic selection in the 2014 State Perth Heat Colt's Tour to the USA. Your selection in the team is a credit to your talent and commitment to the game and an achievement of which you should be very proud.

The touring team is due to depart Perth on the 13<sup>th</sup> June 2014 and return on the 21<sup>st</sup> July 2014. This will be an action packed 5 weeks, where our talents and sportsmanship will be thoroughly tested against numerous teams. You will be visiting and playing against teams in California, Oregon, Idaho, Utah, Arizona, and Nevada. Our route has changed this year as we will be heading out a bit further east, and tour Boise, Idaho, down to Salt Lake City, Utah and onto the Grand Canyon, while finishing in Las Vegas and LA

Most of the details surrounding the tour will be communicated to you in the very near future - there is a lot to organize before the team departs for the USA. You will soon be contacted by me regarding details of the program, but a few of the general aspects are outlined below.

#### PROGRAM COSTS

You should be prepared to pay \$5900 per player for this program. We are doing everything possible to fundraise, and add meal money, but you must be aware of this as a worst case scenario.

This fee covers all of your return airfares, your uniform, accommodation, internal USA travel, some meals (all breakfasts at hotels as well), travel insurance, entry to Major League Games, tours etc....basically everything to do with the trip except personal spending money and some meal money.

Please note that this amount must be **<u>paid in full</u>** before your departure or you will not be permitted to participate in the program. 1<sup>st</sup> payment of \$2,600 is due March 15, and must be paid in cash, cheque, or (Preferably) direct deposit. Credit card charges will incur fees. For those of you that would like to pay everything up front, it helps us lock in the exchange rate and solidify our budget in case of a collapse.

#### TOUR SCHEDULE

The draft tour itinerary (subject to final approval and negotiation) is as follows:

- 13 June Depart Perth for Los Angeles
- 17 June Arrive Sacramento, California
- 19 June Arrive Eureka, California
- 27 June Arrive Portland, Oregon
- 7 July Arrive Boise, Idaho
- 16 July Arrive Grand Canyon, Arizona
- 18 July Arrive Las Vegas, Nevada
- 21 July Depart Los Angeles for Perth

Final details regarding the tour will be communicated to you via the training staff in the coming months. Game updates and a few arrival/departure dates from various cities could change. Once again, congratulations on your selection and we wish you all the best on both this tour, as well for your future in the sport.

Please email acceptance or denial of your selection to me asap in order to make room for alternates.

Yours sincerely, Steve Fish High Performance/Perth Heat Manager Perth Heat/Baseball WA Perth, Australia Mobile: 0413 892 177 Iish@perthheat.com.au

> BARBAGALLO BALLPARK – A Smoke Free Venue! Corner Wilfred and Nicholson Roads, Thornlie, Western Australia Ph: (08) 9383 7735 Fax: (08) 9383 7737 www.perthheat.com.au



#### National Champions 2008 National Champions 2009

Sports Lotteries House PO Box 57, Claremont WA 6910 ACN 087442822 ABN 21522890770

## alcoholthinkagain



healthway



#### Sünday Times





## alcoholthinkagain

## **Registration Form**

Name:		
Age: Club:		and and anticipation and anticipation
Email:		
Emergency Phone:		
Address:		
	Postcode:	Sports Lotteries House
Current level of club play:	State Teams:	alcoholthinkagain
Position 1:	Position 2:	
Please return registration form (Prefe	rahly email)	
Steve Fish		BARBAGALLO
fish@perthheat.com.au		
PO Box 1489		- 3 9 9 A A
Canning Vale DC WA 6970		
		healthway



alcoholthinkagain

#### Sünday Times





BARBAGALLO BALLPARK – A Smoke Free Venue! Corner Wilfred and Nicholson Roads, Thornlie, Western Australia Ph: (08) 9383 7735 Fax: (08) 9383 7737 www.perthheat.com.au

	To munity Fo Please submit co		ort He Dona	dland tions App		
Section 1a: Applic	ant Details					
Identify who is applyin	g for this fundir	ng:				
Individual Pers	on	Communi	ty Organ	isation	Not F	or Profit
Organisation/ Individ	ual Name:	reloar Child C	are Centr	e Inc		
Contact Person:	<u>_</u> F	Fiona Janse va	n Rensbu	urg		
Position within Organ	nisation: (	Centre Director				
Postal Address:	PO BOX 262	6 South Hedlar	nd		Postcode:	6722
Telephone:	08 91401666		Email:	treloardirecto	<u>r@westnet.c</u>	om.au
Applicants a	re requested t	o complete Al	LL sectio	ons relevant to	o their applic	ation.
Section 1b: Organ	isation Deta	ils				
Incorporated:	Yes	No 🗌		Year of Inco	rporation:	1994
lf Yes, please attach a	copy of your C	Certificate of Ind	corporatio	on		
ABN:	21313057807			_		
Registered for GST:		Yes N	o	]		
Section 1c: Public	Liability Ins	surance				
Does your organisati	on have Publi	c Liability Insu	urance:	Yes	No	
If No, are you/your or Association)?	ganisation co	vered under a	nother a	ssociation (e.	g. State Spo	rting
Yes	No 🗌	lf yes, by v	vho?			
If No, will you/your o	ganisation be	obtaining cov	ver for th	nis event?		
Yes	No 🗌	lf yes, by v	vho?			



## **Community Funding & Donations Application**



Please submit completed form to council@porthedland.wa.gov.au

#### Section 1d: Authorisation

I certify that the information provided on this application is correct to the best of my knowledge and that I am authorised to apply for funding on behalf on this community organisation/ individual. If successful, I will acquit the funds received before the end of the financial year in which they were received.

Full name:	Fiona Janse van Rensburg		
Signed:		Date:	14/02/14

#### **Section 2a: Application Details**

What is the name of your Project / Event:

Sustainability within Early Childhood Education

Provide a brief outline of your project / event and what you would like to achieve.

As part of the requirments set by the Australian Childrens Education and Care Quality Authority

our Childrens service must provide opportuniites and resources that encorage and reflect

sustainability for all children enrolled. Our centre is obligated topurchase natural resources whic

encourage exploration and education and also provide a sustainable environment for children.

Outline how ToPH funding will specifically be used.

Any funds received from the TOPH will go towards the purchase of resources made from natural

materials and educational pieces that focus on a range of sustainable practices for ages

from 12 weeks to 12 years.

Has this project or event previously been supported by the Town's Funding & Donations Policy?

\_ Yes

No

If Yes, in which year?

Please provide details:





**Community Funding & Donations Application** 

Please submit completed form to council@porthedland.wa.gov.au

#### Section 2b: Type of Community Support

#### Which type(s) of community support are you seeking (refer to policy 6/003):

Establishment Funding (max \$2,000 cash)	
Periodical Funding* (max \$1,000 cash)	
In-kind Contributions	
Waiver of Fees	
Development of Talented Local People (max \$500)	

\* provide evidence of 50% cash contribution from applicant organisation.

#### Details of funds from applicant:

#### **Section 2c: Funding Details**

#### Detail the amount of each type of funding requested from contributing parties:

	Contributed by Applicant	Contributed by Other Funding Sources	Requested to be contributed by ToPH
Cash (max \$2,000 by ToPH)	\$500	\$	\$2,000
Venue fees funded	\$	\$	\$
In-kind contributions*	\$	\$	\$
Total (max \$5,000 by ToPH)	\$	\$	\$

\* refer to Policy 6/003 for eligible criteria and provide details of in-kind requested (i.e. bins, vehicle usage, mowing, etc)

#### **Section 3: Recognition**

Detail how the funding / support from the Town of Port Hedland will be recognised : An article of thanks and recognition in the local paper paid by Treloar An article in our centre newsletter that is distributed to all families that use the service.





## **Community Funding & Donations Application**

Please submit completed form to council@porthedland.wa.gov.au

#### Section 4: Application Criteria / Checklist

Please ensure the application meets all criteria below:

- a. Applicant has read, understood and acknowledged the conditions and eligibility requirements contained in Policy 6/003 'Community Funding & Donations'
- b. The positive contribution the event or project will make to the Hedland community
- c. The information requested meets the requirements of this policy
- d. The applicant certifies within the application that they are authorised to apply for Town of Port Hedland support and to represent the applicant organisation
- e. The applicant certifies that the information contained within the application is true and accurate, with commensurate evidence / documentation able to be provided on request from the Town
- f. Sufficient financial information has been provided to clearly identify the items on which monies will be spent, their discrete costs and their importance to the success of the event or project
- g. The level of resource contribution to be made by the applicant, relative to their capacity to do so, as well as the accessibility of funds from other sources.

#### Attachment 7 to item 12.1 Town of Port Hedland



## **Community Funding & Donations Application**



containing a Donations Applicatio

Please submit completed form to <u>council@porthedland.wa.gov.au</u>

Section 1a: Applicant Details
Identify who is applying for this funding:
Individual Person Community Organisation Not For Profit
Organisation/Individual Name: Dragon's Netball Club
Contact Person: Natasha Wumki
Position within Organisation: Coordinator
Postal Address:   Kul CI, Sth Hidland. Postcode: 6722
Telephone: 0466407257 Email: dragonsnetballegmail.com
Applicants are requested to complete ALL sections relevant to their application.
Section 1b: Organisation Details
Incorporated: Yes No X Year of Incorporation:
If Yes, please attach a copy of your Certificate of Incorporation
ABN:
Registered for GST:     Yes     No
Section 1c: Public Liability Insurance
Does your organisation have Public Liability Insurance: Yes X No
If No, are you/your organisation covered under another association (e.g. State Sporting Association)?
Yes X No If yes, by who? Port Hedland Netball Association
If No, will you/your organisation be obtaining cover for this event?
Yes No If yes, by who?



## **Community Funding & Donations Application**



Please submit completed form to <u>council@porthedland.wa.gov.au</u>

#### Section 1d: Authorisation

I certify that the information provided on this application is correct to the best of my knowledge and that I am authorised to apply for funding on behalf on this community organisation/ individual. If successful, I will acquit the funds received before the end of the financial year in which they were received.

Full name:

Signed:

Natasha Wumki Multi Date: 10.03.14

**Section 2a: Application Details** 

What is the name of your Project / Event:

Dragons Netball Chub - Competer Port Hedland Netball Assoc.

Provide a brief outline of your project / event and what you would like to achieve.

As the organisation of Netball in the Pilbara comes in to
alignment with the rest of WA through Netball WA we are now
an entity on our own. This means uniforms, equipment and fees
are not the responsibility of each club, and we will be purchasing Outline how ToPH funding will specifically be used. all equipment as a new club.
Outline how ToPH funding will specifically be used. all equipment as a new club.
This funding will be used to purchase balls and training
equipment for up to 7 learns, for game and training
purposes.
Has this project or event previously been supported by the Town's Funding & Donations Policy?
If Yes, in which year?

Please provide details:



## **Community Funding & Donations Application**



Please submit completed form to <u>council@porthedland.wa.gov.au</u>

#### Section 2b: Type of Community Support

#### Which type(s) of community support are you seeking (refer to policy 6/003):

Establishment Funding (max \$2,000 cash)	\$2000.
Periodical Funding* (max \$1,000 cash)	
In-kind Contributions	
Waiver of Fees	
Development of Talented Local People (max \$500)	

\* provide evidence of 50% cash contribution from applicant organisation.

#### Details of funds from applicant: We currently have \$1800.00 in the bank which will be used to establish the committee and the administrative costs associated.

#### Section 2c: Funding Details

Detail the amount of each type of funding requested from contributing parties:

	Contributed by Applicant	Contributed by Other Funding Sources	Requested to be contributed by ToPH	
Cash (max \$2,000 by ToPH)	\$ 1800-00	\$	\$ 2000.00	
Venue fees funded	\$	\$	\$	
In-kind contributions*	\$	\$	\$	
Total (max \$5,000 by ToPH)	\$ 1800.00	\$	\$ 2000.00	

\* refer to Policy 6/003 for eligible criteria and provide details of in-kind requested (i.e. bins, vehicle usage, mowing, etc)

#### **Section 3: Recognition**

#### Detail how the funding / support from the Town of Port Hedland will be recognised :

We are looking at placing logo's on the equipment or
bibs that are worn or used on match days. We would
also acknowledge you on our newsletters and Facebook
page and email correspondence.

## **Town of Port Hedland**

**Community Funding & Donations Application** 

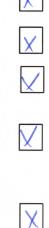


Please submit completed form to <u>council@porthedland.wa.gov.au</u>

#### Section 4: Application Criteria / Checklist

Please ensure the application meets all criteria below:

- a. Applicant has read, understood and acknowledged the conditions and eligibility requirements contained in Policy 6/003 'Community Funding & Donations'
- b. The positive contribution the event or project will make to the Hedland community
- c. The information requested meets the requirements of this policy
- *d.* The applicant certifies within the application that they are authorised to apply for Town of Port Hedland support and to represent the applicant organisation
- e. The applicant certifies that the information contained within the application is true and accurate, with commensurate evidence / documentation able to be provided on request from the Town
- f. Sufficient financial information has been provided to clearly identify the items on which monies will be spent, their discrete costs and their importance to the success of the event or project
- g. The level of resource contribution to be made by the applicant, relative to their capacity to do so, as well as the accessibility of funds from other sources.



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Attachment 8 to item 12.1 Town of Port Hedland Town of Port Hedland	
Community Funding & Donations Application	
Please submit completed form to <u>council@porthedland.wa.gov.au</u>	
Section 1a: Applicant Details	
Identify who is applying for this funding:       Not For Prof         Individual Person       Community Organisation       Not For Prof         Organisation/ Individual Name:       SAFE Hedland       Saving Animals 7         Organisation/ Individual Name:       SAFE Hedland       Saving Animals 7         Contact Person:       JII Quivooy       Sam Wait         Position within Organisation:       Volunteer / Fundraising       Co-ordin         Postal Address:       PO Box 197, Port Hedland       Postcode:       67         JIII - 04345 75286       Email:       hedland@ safe.asn.a       or         Applicants are requested to complete ALL sections relevant to their application.       Organisation:       Organisation:	from nwrigh ator 121
Section 1b: Organisation Details         Incorporated:       Yes       No       Year of Incorporation:         If Yes, please attach a copy of your Certificate of Incorporation       - have been vnable source - any gy         ABN:       NA       Please sall         Registered for GST:       Yes       No	e to is sam.
Section 1c: Public Liability Insurance         Does your organisation have Public Liability Insurance:       Yes         If No, are you/your organisation covered under another association (e.g. State Sporting Association)?         Yes       No         If yes, by who?         If No, will you/your organisation be obtaining cover for this event?         Yes       No         If yes, by who?	
Yes No If yes, by who? N/A - not needed.	







Please submit completed form to council@porthedland.wa.gov.au

#### Section 2b: Type of Community Support

Port Hedland

#### Which type(s) of community support are you seeking (refer to policy 6/003):

Establishment Funding (max \$2,000 cash)Periodical Funding\* (max \$1,000 cash)In-kind ContributionsWaiver of FeesDevelopment of Talented Local People (max \$500)

\* provide evidence of 50% cash contribution from applicant organisation.

Details of funds from applicant: SAFE all raise what through markets merchand about the Walk

#### **Section 2c: Funding Details**

Detail the amount of each type of funding requested from contributing parties:

	Contributed by Applicant	Contributed by Other Funding Sources	Requested to be contributed by ToPH
Cash (max \$2,000 by ToPH)	\$	\$	\$ 1315.27 + \$420.20
Venue fees funded	\$	\$	\$
In-kind contributions*	\$	\$	\$
Total (max \$5,000 by ToPH)	\$	\$	\$ 1735.47

\* refer to Policy 6/003 for eligible criteria and provide details of in-kind requested (i.e. bins, vehicle usage, mowing, etc)

#### **Section 3: Recognition**

Detail how the funding / support from the Town of Port Hedland will be recognised : and at the nelcome On our Jacebook Page (1 Wowers) 100 Hedland Ma N choose to onate showbaas reups omina In WILL endeavor to new uniforms.



# **Town of Port Hedland Community Funding & Donations Application**



14-3-14

Date:

Please submit completed form to council@porthedland.wa.gov.au

#### Section 1d: Authorisation

I certify that the information provided on this application is correct to the best of my knowledge and that I am authorised to apply for funding on behalf on this community organisation/ individual. If successful, I will acquit the funds received before the end of the financial year in which they were received.

Full name:

Signed:

Section 2a: Application Details

What is the name of your Project / Event:

Wellome to	Hedland	Markets	8	Shirts	[Pens	for o	rgoing	
				- I A	auld like	to achieve	a cochia	•

Provide a brief outline of your project / event and what you would like to ac

JIII QUIVOO

We are selling showbags for Thelcome to Hedland Markets
We use these markets to raise funds but more importantly
to be seen in the community & share what we do.
The shirts flens would be worn for all events Outline how ToPH funding will specifically be used.
Outline how ToPH funding will specifically be used.
Topurchase showbags (Total\$420.20) & Purchase Pens &
Shirts (\$1315.27)

Has this project or event previously been supported by the Town's Funding & Donations Policy? But TopH do vegularly support SAFE. Not for this event or for shirts before. No

If Voo	in	which	voar?
Il res,	111	WINCH	yeari

Yes

Please provide details:

Paus walk etc.



# Town of Port Hedland Community Funding & Donations Application



Please submit completed form to council@porthedland.wa.gov.au

#### Section 4: Application Criteria / Checklist Please ensure the application meets all criteria below:

- a. Applicant has read, understood and acknowledged the conditions and eligibility requirements contained in Policy 6/003 'Community Funding & Donations'
- b. The positive contribution the event or project will make to the Hedland community
- c. The information requested meets the requirements of this policy
- d. The applicant certifies within the application that they are authorised to apply for Town of Port Hedland support and to represent the applicant organisation
- e. The applicant certifies that the information contained within the application is true and accurate, with commensurate evidence / documentation able to be provided on request from the Town
- f. Sufficient financial information has been provided to clearly identify the items on which monies will be spent, their discrete costs and their importance to the success of the event or project
- g. The level of resource contribution to be made by the applicant, relative to their capacity to do so, as well as the accessibility of funds from other sources.

ft International PTY LTD	Account Number: 2428 03 Swift Code: WPACAU25 (If paying from outside AU) New South Wales 2428, Australia. Baak Address: 38 Adm# 54, Forster New South Wales 2428, Australia. Paying by debit card	F													
				01											
e info@dynamicglft.com.au	Dynamic Gift International Pty Ltd Attention: James Perry	13 Dee Cres TUNCURY NSW 2428 AUSTRALIA		Amount AUD	539.70	240.00	30.00	350.00	36.00	119.57	1,315.27	0.00	1,315.27		
F 02 6555 5104 🛛 🖬 info@dynamicglft.com.au	Dynamic Gift International Pty Ltd Attention: James Perry	13 Dee Cres TUNCURRY NSW 2428 AUSTRALIA AUSTRALIA		GST Amount AU	10.00% 539.70	10.00% 240.00	10.00% 30.00		10.00% Second						
		Invoice Number 13 Dee Cres W3391 TUNCURRY NSW 2428 AUSTRALLA Reference T2251	ABN 51 160 398 694								Invoice Total AUD 1,315.27	Total Net Payments AUD	Amount Due AUD 1,315.27		
F 02 6555 5104	Invoice Date 14 Mar 2014		ABN 51160398694	GST	10,00%	10.00%	10.00%	10.00%	10.00% 5.144401						

ABN: 51 160 398 694. Registered Office: 13 Dee Cres, TUNCURRY, NSW, 2428, Australia

Enter the amount you are paying above

W3391 1,315.27 31 Mar 2014

Due Date Amount Enclosed

Invoice Number Amount Due

To: Dynamic Gift international Pty Ltd Attention: James Perry 13 Dee Cres TUNCURN NSW 2428 AUSTRALIA

Samantha Wainwright Case Manager SAFE Hedland Inc Mobile: 0417 569 821 Email:

Customer

PAYMENT ADVICE

casemanager@hedlandpets.com Website: www.safe.asn.au

#### Hi Samantha

Thank-you for your order we received today on behalf of Safe Hedland. Your required date: 23/5/14, Our dispatch date: 5/5/14, Please allow 9 days for delivery.

Your order consists of the following Showbags:

Smartie	10	
Wise Guy	10	
Kit Kat	10	
Beanie Kids	5	
Nerds	10	
Glowbag	10	
Bertie Beetle	10	
Girls Only	10	
Total		\$ 319.25
Freight		\$ <u>100.95*</u>
TOTAL		\$ 420.20

\*Please note we are based in Victoria. We have been quoted the above freight charge to deliver to South Hedland WA.

Once payment has been received and cleared, your order will be dispatched. You are able to make your payment via cheque, money order, B-Pay, direct debit, internet transfer or credit card over the phone.

Our bank details are Commonwealth Bank, BSB: 063 125, Account No.: 1056 2225, Account Name: Back At Three Pty Ltd T/As Mr Showbags.

Please contact us if you require your invoice to be emailed or faxed to enable you to make payment.

Again, thanks for choosing Mr Showbags and we trust your event will a great success.

Regards

Jackie

Easy Effective Fundraising Jackie Kiely Accounts jackie@mrshowbags.com.au tel: 1300 677 469 www.mrshowbags.com.au Attachment 9 to Item 12.1



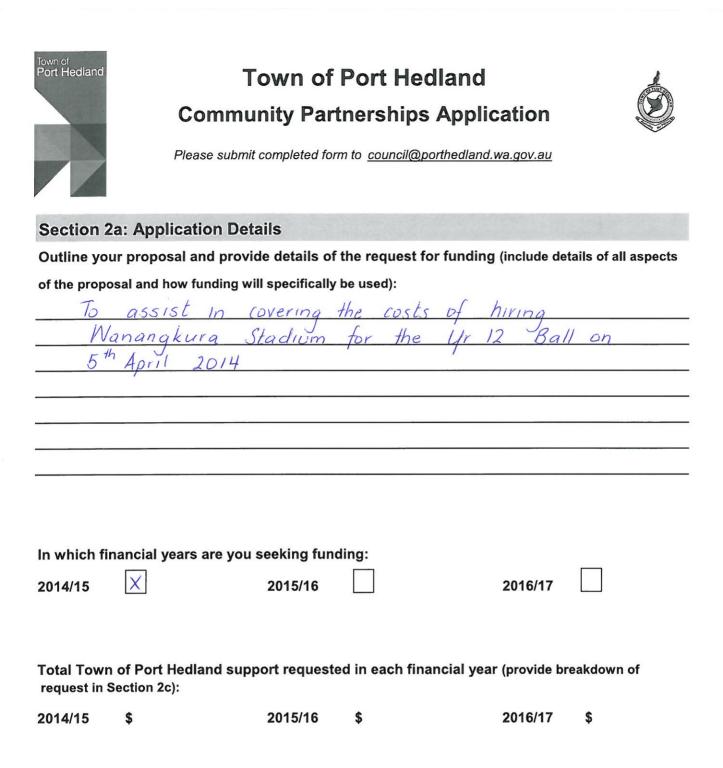
## Town of Port Hedland Community Partnerships Application



Please submit completed form to council@porthedland.wa.gov.au

Section 1a: Applicant Details
dentify who is applying for this funding:
ndividual Person Community Organisation
Drganisation/Individual Name: Hedland Senior High School
Organisation/Individual Name:HedlandSeniorHighSchoolContact Person:Mr.sM Ifould.
Position within Organisation: Ball Co-ordinator - Assistant
Postal Address: Hamilton St South Postcode: 6722
elephone: 9172 8047 Email:
Section 1b: Individual/Organisation Details
ncorporated: Yes No X Year of Incorporation:
f Yes, please attach a copy of your Certificate of Incorporation
NBN: 78 435 600 447
Registered for GST: Yes X No
Section 1c: Authorisation
certify that the information provided on this application is correct to the best of my knowledge and th am authorised to apply for funding on behalf on this community organisation/ individual. If successfu will acquit the funds received before the end of the financial year in which they were received.

Full name:	Miriam Ifould		
Signed:	AMStould	Date:	20.3.14





Town of Port Hedland Community Partnerships Application



Please submit completed form to council@porthedland.wa.gov.au

#### Section 2b: Funding Aims

#### Describe how your proposal meets the funding aims of the ToPH (complete one or more sections):

1. To increase community access to essential programs and services through the development of partnerships between the Town and not for profit community organisations

There 15 only Hedland 1 High School in and ticket unaffordable \$100.00 15 of not employed 17 ther this he assessible acherr event more and the Lounger the 21/1 See shire positive

2. To provide assistance to not for profit community organisations with the capacity to assess community need to develop essential community services or programs which are consistent with the Town of Port Hedland's strategic objectives and programs, but not directly operated by the Town

AS Q. yearly event occurring 1ear fund 15 sh the hur UPAr C this will VPCPI as more dable 15 the funds they starting lear.

3. To provide initial support for significant community, sport, recreation and cultural events and to ensure these activities build independent capacity and reduced reliance on Town funding over a set period of time Ur 12's organise the ball The with assistance from their initial ordinator This funding applic ation can then on the them the process and trom Identity Individual an



## Town of Port Hedland Community Partnerships Application



Please submit completed form to <u>council@porthedland.wa.gov.au</u>

#### **Section 2c: Funding Details**

#### Detail the amount of each type of funding requested from contributing parties:

	Contributed by Applicant	Contributed by Other Funding Sources	Requested to be contributed by ToPH
FY2014/15			
Cash	\$ 1200.00	\$	\$
Venue fees funded	\$	\$	\$ 1932 . 80
In-kind contributions*	\$	\$	\$
FY2015/16			
Cash	\$	\$	\$
Venue fees funded	\$	\$	\$
In-kind contributions*	\$	\$	\$
FY2016/17			
Cash	\$	\$	\$
Venue fees funded	\$	\$	\$
In-kind contributions*	\$	\$	\$

\* refer to Policy 6/003 for eligible criteria and provide details of in-kind requested (i.e. bins, vehicle usage, mowing, etc)

#### Section 3: Sustainability

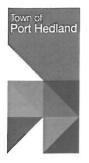
Describe how your activity, event or program will become independently sustainable beyond Partnership support from the Town:

Thi.	s Will	0551SI	t with	tuna	ling th	is Me	ar a	nd roll	1 this	
OVER	to	next	year	as	well	.50	they	don't	have	
to	charge	an	much	SO	that	it is	acc	essible	to me	ore
stud	ents.									

#### **Section 4: Recognition**

Detail how the funding / support from the Town of Port Hedland will be recognised :

			school as		
nnoun	ce ut	at the	school as	semply.	 
				0	
(a. c) (b) (c)				0	



## Town of Port Hedland Community Partnerships Application



Please submit completed form to council@porthedland.wa.gov.au

#### Section 5: Application Criteria / Checklist

#### Please ensure the application meets all criteria below:

- a. The positive contribution the event or project will make to the Hedland community
- b. The information requested meets the requirements of this policy
- c. The applicant certifies within the application that they are authorised to apply for Town of Port Hedland support and to represent the applicant organisation
- d. The applicant certifies that the information contained within the application is true and accurate, with commensurate evidence / documentation able to be provided on request from the Town
- e. Sufficient financial information has been provided to clearly identify the items on which monies will be spent, their discrete costs and their importance to the success of the event or project
- f. The level of resource contribution to be made by the applicant, relative to their capacity to do so, as well as the accessibility of funds from other sources.