

# Cash for Trash - Application Form

## Form Preview

### Eligibility

\* indicates a required field

#### Applicants - Please note:

Before completing this application form, you should have read the [Town of Port Hedland Grants Program overview](#) and specifically the [Cash for Trash Grant guidelines](#).

Incomplete applications and/or applications received less than 4 (four) weeks prior to the event date will not be considered.

The participants or legal guardians signed below agree the Town of Port Hedland will not be liable for:

- any injuries sustained by a participant;
- any loss or damage to property owned by, or in the possession of, a participant; and
- any acts or omissions, negligence or fault of any person participating in the clean-up.

The below section "**Confirmation of Eligibility**" of the application form is designed to help you, and us, understand if you are eligible for this grant. It is crucial that you complete these questions before any others to ensure you do not waste your time applying if your proposed fundraising initiative is unsuitable for this grant.

The Town's Youth and Community Development Team is ready to answer any questions you may have in relation to your application.

If you have any questions in regard to these eligibility criteria, please contact [grants@porthedland.wa.gov.au](mailto:grants@porthedland.wa.gov.au).

### Confirmation of Eligibility

#### I confirm the applicant:

- has read and understands the Cash for Trash grant guidelines.
- does not owe any acquittals or money to the Town of Port Hedland.
- is a resident living in the Town of Port Hedland local government area - if you are unsure, visit this [link](#).
- is a local individual, Community Group or Not-For-Profit Organisation.

#### I confirm this application is being lodged at least 4 (four) weeks before my proposed event.

Please select below: \*

☐ Yes ☐ No

You must confirm that all statements above are true and correct.

### Contact Details

\* indicates a required field

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### Privacy Notice

We pledge to respect and uphold your rights to privacy protection under the [Australian Privacy Principles](#) (APPs) as established under the *Privacy Act 1988* and amended by the *Privacy Amendment (Enhancing Privacy Protection) Act 2012*. To view our privacy statement, go to the [Town of Port Hedland Privacy Statement](#).

### Community Group Application

**Are you applying on behalf of a Community Group or Not-For-Profit Organisation?**

\*

☐ Yes

☐ No

**If yes, what is the name of the Community Group or Not-For-Profit Organisation?**

### Application Contact Details

**Applicant \***

Title

First Name

Last Name

**Applicant Address \***

Address

  

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

**Applicant Phone Number \***

Must be an Australian phone number.

**Applicant Email \***

Must be an email address.

**Please list the names, age and contact details of all participants**

### Previous support

**Has the applicant had previous financial support from the Town of Port Hedland?**

\*

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☐ Yes

☐ No

☐ I don't know

**If yes, please detail:**

Include the year, activity and amount received.

## Event Details

\* indicates a required field

**Clean-up Site / Location \***

**Clean-up Date: \***

Must be a date.

Application must be submitted at least 4 (four) weeks prior to the proposed event.

**Activity Start & Finish Time:**

**Please provide a summary of your fundraising initiative \***

Word count:

Must be at least 30 words.

Be descriptive, but succinct. Include a brief summary of why you are fundraising and what event, activity or items for which you will use your grant funds.

## Bank Details

\* indicates a required field

### Bank Details for Payment

**Applicant Primary Bank Account \***

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

**Bank & Branch Name**

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### Evidence of bank details

Attach a file:

This can be a copy of a bank deposit slip, cheque or bank statement showing the bank logo, account name, BSB and account number – balances are not required. The Proof of Account (or similar) generated through online banking is not acceptable by the Town for this purpose.

## Certification and Feedback

\* indicates a required field

### Certification

This section must be completed by the applicant.

The applicant must ensure they have read the [Town of Port Hedland Grants Program overview](#) and the [Cash for Trash Grant guidelines](#).

**I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant is approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the letter of approval.**

**I agree \***

☐ Yes

☐ No

**Name of applicant: \***

Title

First Name

Last Name

**Contact Phone Number: \***

Must be an Australian phone number.

**Contact Email: \***

Must be an email address.

**Date \***

Must be a date

### Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button, please take a few moments to provide some feedback.

**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? \***

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

**Any suggestions of ways this process can be easier?**