

City of Albany Town Hall and Town Square In Kind Support Application Form

OVERVIEW

Purpose

To encourage the development of the local community by supporting performances, exhibitions and events that make a positive and creative contribution to the region.

This application is for in kind support only. The support that is provided through this application is the waiver or reduction of fees and charges associated with the venue hire of either the Town Square or Town Hall.

Logistics

Applications can be submitted year round. However, to secure the date and allow sufficient time for processing, applications must be lodged at least **three months prior** to the start of the performance, exhibition, event, project or activity.

ELIGIBILITY

Town Hall or Town Square in kind support is available to charitable organisations, not-forprofit community groups, government bodies, school groups or groups delivering a program deemed of significant community and/or cultural value to the City of Albany.

The Town Hall or Town Square must be available on the dates requested.

If you are holding an event, you may also be required to complete an Event Approval Application. Your booking may be revoked if you do not complete the associated documents. To find out if you need to complete an Event Approvals Application, please refer to the City of Albany's Event Planning Guidelines or contact the Events Approval and Projects Officer on 08 6820 3035.

Activities that are already supported by the City of Albany through sponsorship or funding are not eligible to apply for Town Hall or Town Square in kind support. Venue hire fees should be incorporated into the original funding agreements.

APPLICATION APPROVAL PROCESS

Applicants are required to:

1. Contact the Events Team to ensure that the dates required are available.

If you wish to book the Town Hall, please contact the Administration Assistant

(Events and Communications) on 08 6820 3033 or on

events@albany.wa.gov.au.

If you wish to book the Town Square, please contact the Events Approval and Projects Officer on 08 6820 3033 or on <u>eventsapprovals@albany.wa.gov.au</u>.

2. Read the relevant venue's terms and conditions, which are located within

the Town Hall Booking Form or the Town Square Booking Form.

- **3.** Complete the Town Hall and Town Square In Kind Support Application Form and return to records@albany.wa.gov.au or hand deliver to 102 North Road, Albany WA 6330.
- **4.** Applications will be reviewed and successful applicants will be contacted to complete arrangements.



INFORMATION

Organisation Name		
Name of Applicant		
Postal Address		
Phone		
Mobile		
Email		
I am a	\Box Charitable Organisation and I am registered with the Charitable	
	Collections Advisory Committee	
	□ Not-for-Profit Community Organisation or Group	
	☐ Government Authority	
	Commercial Organisation	
	□ Other:	
Activity Title		
Activity Bump-In (Date		
and Time)		
Activity Start Date		
Activity Start Time		
Activity End Date		
Activity End Time		
Activity Bump-Out		
(Date and Time)		
Location	🔲 Town Hall Theatre	
	□ Town Hall Gallery (Carol Pettersen Hall)	
	Town Square	
	□ Other	
Is this activity already		
being supported by the	□ ^{Yes}	
City of Albany through	n No	
sponsorship or funding?		



TYPE OF SUPPORT REQUESTED:

 \square Fees waived

□ Other

If you are requesting that Town Hall or Town Square fees are waived, please outline what fees you would like waived e.g. the booking fee, venue hire, cleaning fee etc.

If you are requesting other support, please outline what support you would like to receive from the City of Albany.

ACTIVITY/ORGANISATION:

Please provide a brief description of the activity you are requesting support for.		
Please provide a brief description of you/your organisation.		
Does your event provide significant community and/or cultural value to the City of Albany? If		
so, please outline.		



REQUIREMENTS FOR APPROVED APPLICATIONS

- **1.** Acknowledgement of the support from the City of Albany verbally at events.
- 2. Use of the City of Albany logo in printed promotional material.

SIGNATURE

Signed: ______ Name: _____ Date: _/___/___

Total value of in kind support	Value:		
Application assessed by	Name:		
	Name:		
	Name:		
Request Approval	Approved	Not Approved	
	Name:		
	Signature:		
	Date:		
Reasons for not approving			

OFFICE USE ONLY