Logo, company name

Description automatically generated2024/25 Sports Participation Scheme Application

|  |  |
| --- | --- |
| Information with solid fill | How to submit Email form and supporting documentation to [info@capel.wa.gov.au](mailto:info@capel.wa.gov.au)  Deliver to Shire Administration Building on 31 Forrest Road, Capel  Send in form to PO BOX 369, Capel WA |

# Applicant Details

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Title |  | Given name(s) | | |  | Surname |
|  |  |  | | |  |  |
| Phone number | | | | | | |
|  | | | | | | |
| Address: | | | | | | |
|  | | | | | | |
| Date | | |  | Email | | |
|  | | |  |  | | |

# Event Details

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Event | | |  | Event Start Date |  | Event End Date | |
|  | | |  |  |  |  | |
| Sporting Body | | | | | | |
|  | | | | | | |
| Contact Person |  | Phone Number | | | | |
|  |  |  | | | | |

# Supplementary Information

|  |  |  |
| --- | --- | --- |
| Funding Category |  | Representation |
| Under 18  18 Years and over |  | State  National  International |

# Declaration

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, declare that the above information is to the best of my knowledge, true and correct. I will endeavour to acknowledge Councils support wherever possible.

|  |  |  |
| --- | --- | --- |
| Signature |  | Date |
|  |  |  |

# Application Check List

* Applicants must attach a letter or email, from the sporting body confirming the selection.
* Applicants must reside within the Shire of Capel, please provide proof of residency with application
* Please allow 1 month processing time
* Retrospective funding is not available (application needs to be lodged before the sporting event occurs)
* Up to $350 is available per application for international, national, and state competition
* Applications may be made at any time, but only once during a budget year