

Healthy Sports Grant - Application Form - Up to \$4,000

Our Healthy Sports Program works in partnership with Western Australian sporting clubs and district associations to build a healthy and more active Western Australia (WA).



Introduction

Healthy Sports Grant

APPLICATION FORM - UP TO \$4,000

Our **Healthy Sports Program** works in partnership with Western Australian sporting clubs and district associations to build a healthy and more active Western Australia (WA).

Instructions

- · Applications are open year round.
- This form is programmed to suit your organisation choice and will automatically skip irrelevant pages.
- · You will be unable to progress through the application without completing some mandatory fields.
- You can preview a pdf example of the Healthy Clubs funding option <u>here</u> and the Healthy Clubs + Green canteen funding option <u>here</u>, however only electronic submissions of this form will be accepted.
- · Further information about the grant can be found in the guidelines document

Please contact Healthway's Healthy Partnership Team if you require support with your application on 133 777 or email healthway@healthway.wa.gov.au.

Save



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Eligibility Criteria

To be eligible for Healthy Sports funding, clubs and district associations are required to meet the following criteria:

- Compete in (club) or facilitate (district association) a recognised sporting competition.
- Be an incorporated association, company, statutory body or trust.
- Be ABN registered or provide 'Statement by Supplier' form.
- Fulfil all previous acquittal requirements for Healthway funded programs.
- Hold a public liability insurance policy of at least \$10,000,000 for the term of the project.
- Have appropriate Health and Safety and Risk Management policies and practices in place to deliver the project.
- Comply with all State and Commonwealth Laws which apply to the project including those relating to COVID-19 measures.

A club or district association is not eligible if it:

Has an existing Healthway partnership for the same period.

•	Has received Healthy Sporting Club funding in either 2020 or 2021. Receives or is eligible to receive Healthway funding directly through a State Sporting Organisation	on.
	Yes, this application meets the eligibility criteria *	
	Back Save Next	



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Type of organisation

Please tick the box that best describes your organisation.

Healthy Clubs -

dd-MMM-yyyy

End date

dd-MMM-yyyy

Back

A registered sporting club without a canteen or kiosk applying for \$2,000 to undertake simple healthy eating actions

Healthy Clubs + Green Canteen - Sporting Club

A registered sporting club with a canteen or kiosk applying for \$4,000 to support healthy eating actions and to upgrade our canteen kiosk facilities to support the sale of healthy items.

Healthy Clubs + Green Canteen - District Sporting Association

A registered district sporting association with a canteen or kiosk applying for \$4,000 to support healthy eating actions and to upgrade our canteen kiosk facilities to support the sale of healthy items.

Your organisation *
O Healthy Clubs
O Healthy Clubs + Green Canteen - Sporting Clubs
Healthy Clubs + Green Canteen - District Sporting Association
Sporting Club Competition details Please detail the name of the competition in which your club competes?
District Sporting Association details Please detail the name of the competition in which your district association is involved?
Competition season: What are the dates of your normal competition season?
Start date

The Healthy Sports program must be delivered across two competition seasons.

Save



Back

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Organisation details				
Organisation name *				
Enter a value for this field.				
Postal Address				
Street Address				
Address Line 2				
City	State			
Post code	Australia			
Post code	Country			
Phone				
Priorie				
Website				
Organisational Status Please select one of the following: *				
 Incorporated under the Associated Incorporation Act the Act. 	2015 or has made an application to be incorporated under			
O Company (e.g. Pty Ltd under the Corporation Act 200	1)			
O Statutory body (e.g. School, Public Health Unit, Local	Govt ect)			
○ Trust				
Healthy Club Coordinator Please list the details of the person who is responsible	le for the co-oordination of the project.			
-Select- V				
Title First Las	st			
Position				
Email				
Primary contact number				

Next

Save



Back

Healthy Sports Grant

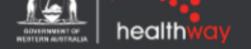
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Signatory details				
1st Legal signatory Club President or Chairperson				
Name * -Select-				
Position Last				
Email				
Primary contact number				
2nd Legal signatory Committee Member				
Name *				
Title First Last Position				
Email				
Primary contact number				
List of current Directors/Board or Committee members				
Please attach a list of your current Directors/Board or Committee members * Please attach a list of your current Directors/Board or Committee members * Prag & Drop (or) Choose File				

Next

Save



Back

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1 2 3 4 5 6 7 8 9 10 11 12 13
Financial details
Details of financial institution
Name of main operating account
Name of institution (include address)
BSB
Account Number
Attach a recent bank statement to verify bank details (Note: We do not require the transaction history). *
Drag & Drop (or) <u>Choose File</u>
GST information
Australian Business Number (ABN)
Is the organisation registered for GST? ☐ Yes
□ No
Budget Note: Do not include GST. Healthway will gross-up your grant by 10% if your club or district association is registered for GST.
Total cost of the project. (Round to nearest dollar value.). *
\$
Total requested from Healthway. (Round to nearest dollar value.). *
\$

Next

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Healthy Eating Actions

The following actions are compulsory in order to apply for this grant and continue the

app	lication.
Вуа	accepting this funding of \$2,000 we agree to:
0	Sign and commit to a Healthy Clubs Pledge *
0 ,	Appoint a Healthy Club Co-ordinator *
	Have at least one club member complete the Fuel to Go & Play Club Official and Stakeholder training (ideally the Healthy Club Coordinator) *
1	Encourage a culture where members choose healthy food and drink options pre, during and post the game. e.g. promote the use of team fruit rosters (instead of Iollies) during and after team sports *
	Educate and empower our members to make healthy choices *
	Host a healthy food and drink activation *
Plea	ase provide details on any of the above strategies

Back

Save



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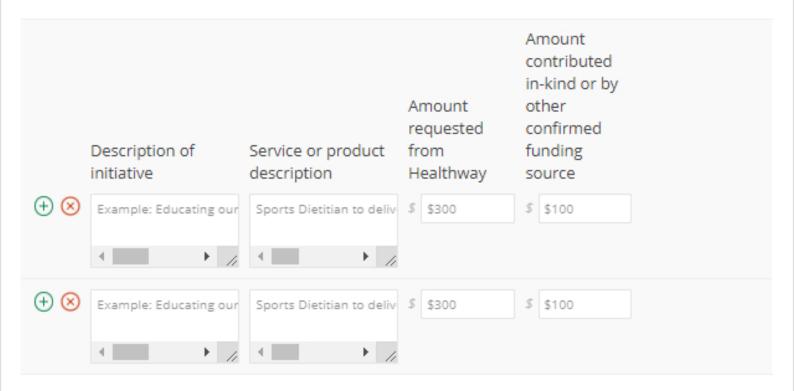
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Healthy Clubs budget

Give a specific breakdown of how the money will be spent with a description. Please include any cash and/or in-kind contributions from the club or other sources. The total cost requested from Healthway should not exceed \$2,000. Do not include GST. Refer to the Healthy Sports Guidelines for more information.

To add more budget items, please click on the green + symbol.



Total amount requested from Healthway *

3

Back



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Statistical data

Healthway will consider how many people will be exposed to health promotion activities through your project. Please indicate in the table below the estimated numbers in each population and age group that may be reached through the project.

Details of your registered members (players only)

	Female	Male
Children 12 and under		
Youth 12-17		
Adult 18-54		
Seniors 55+		

Estimated numbers of priority populations targeted by the project (include spectators)

	Children and young people (under 18)	Aboriginal and Torres Strait Islander	Rural and remote communities	Culturally and linguistically diverse	People disadva
⊕ ⊗					
4					+

Locations in which program events are held

- O Remote isolated location with a population of generally less than 200
- O Rural locations outside of capital cities and regional centres, which are also not remote locations
- O Regional includes Albany, Broome, Bunbury, Busselton, Geraldton, Kalgoorlie and Mandurah
- O Metro Perth metropolitan area

Please list locations

Back

Save



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Requirements for funding

Minimum Health requirements policy

To ensure funded activities align with Healthway's core purpose of promoting and facilitating good health to encourage healthy lifestyles in Western Australia (WA), a number of minimum requirements are applied as a condition of all funding agreements.

I have read Healthway's Minimum Health requirements policy and can confirm that our club/ association will abide by these conditions of funding. *

Co-Supporters Policy

Sponsorship will generally not be provided to clubs that actively promote or allow the promotion of brands that undermine Healthway objectives. This specifically relates to the promotion of fast food, soft drink confectionary, and alcohol brands that results from a sponsorship agreement directly with the club or occurs via third party arrangements (e.g. State Association sponsorship arrangements that require logos on playing uniforms). Clubs can be sponsored by licensed premises provided there is no alcohol product promotion or giveaways.

I can confirm that our club/ association does not have any unhealthy supporters or sponsors

OF

Our club has a sponsorship arrangement to declare

Using the table below please provide relevant particulars regarding any sponsorship support (monetary or product) that may result in the promotion of fast food, soft drink, confectionary, or alcohol brands. Relevant particulars include the name of the product/ brand/ company and details of the benefits provided including signage, logo recognition, advertising (including website), database access, verbal announcement, product etc.

Direc	t CI	ub S	ons	ors	nıp

(e.g. Club receives cash and giveaway vouchers from a local fast food store in return for signage on oval and logo on website)

Third Party Arrangements

(e.g. playing uniforms are required to carry alcohol brand logo as a result of sponsorship arrangement with state association)

Conditions of Funding

Applicants are required to read and agree to our <u>Conditions of Funding</u> as part of an application to Healthway. This document is a legally enforceable agreement between Healthway and the applicant that sets out the conditions governing the funding to be provided if you are successful. It effectively takes the place of a contract. A Conditions of Funding document that has been signed by the person(s) legally able to enter contracts must be attached to your application (e.g. Club President/Chairperson and committee member).

Attach signed Conditions of Funding document *

Drag & Drop (or) Choose File

Back

Save



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Declarations

Healthway is collecting information in this application form (including all attachments) for the purposes of assessing and awarding applications for funding. Information collected will be accessed and used by Healthway for this purpose, as outlined below and in the Healthway Privacy Policy.

Healthway may disclose details of:

- a. Funding applications and information provided in the Application Form, including contact details of officers of the applicant organisation (Customer).
- b. All information relating to any funding provided to the Customer.
- c. Any of the Customer's previous funding and acquittal history with Healthway. to Referees, members and employees of the Western Australian Health Promotion Foundation, Members of Parliament, other Government agencies or departments or other Western Australian statutory authorities for the purpose of advising on, processing, analysing, evaluating, promoting or reporting the application or the funding or enabling the other government entity to process and assess any other grant applications submitted by the Customer and otherwise in accordance with the Healthway Privacy Policy.

Details of application requests and approved funding may be made available on Healthway's website and annual reports, to Members of Parliament and other Government agencies or departments or Western Australian statutory authorities, to members of the Western Australian Health Promotion Foundation, to others for research and work purposes and in the media and other publications, as deemed appropriate by Healthway (collectively Other Sources). Customer information provided via this application form will be available to other authorised representatives of the Customer and Healthway staff.

Terms and Conditions

Back

The Customer and I acknowledge and agree to the following:

- 1. I am authorised to act on behalf of the Customer to make funding applications.
- I warrant that all information made or given in relation or preparatory to the Funding is true, correct, complete and in no way misleading or deceptive.
- 3. I have obtained the necessary consent from the Customer to ensure that I can agree to the information being disclosed and used by Healthway as outlined in these Terms and Conditions.
- 4. I have read, understood, and obtained the necessary consent from the Customer to agree to and meet the requirements of the Healthway Healthy Sports Program Guidelines for all projects and/or activities for which the funding is to be used.
- s. I understand and have obtained the necessary consent from the Customer that in relation to the funded project/activity, the Customer must not enter into, perform or participate in any dealings, arrangement or contract whereby the Customer is promoting, advertising or endorsing, or allowing the advertising, promoting or endorsing of, any alcohol, food and beverages, the promotion of gambling products to underage audiences and tobacco products (which is or is likely to impinge upon or conflict with the philosophy or objectives of Healthway) without Healthway's prior written consent.
- 6. Where Healthway approves funding, Healthway may make available, disclose or publish the Customer's name, amount of the approved funding and the project to the Other Sources.

Signature				
Clear				
Clear				
Name				
-Select-	~			
Title		First	Last	

Save

Review

Submit