



Community Welfare Fund Sponsorship Guidelines and Applications

1. Mission

The Returned and Services League of Australia (Queensland Branch) Gaythorne Sub-Branch Inc. (Gaythorne RSL) strives to be a highly respected and valued community supporter. One way we aim to achieve this is to provide financial assistance to the local community for individuals and groups to strive for pursuits of excellence.

2. Process

Gaythorne RSL receives many requests for sponsorships. The Finance Sub Committee assesses the Sponsorship applications and provides a recommendation to the Board of Directors.

All applications are to be received by the Gaythorne RSL prior to 31 October. The AGM is held in March each year, decisions on Sponsorships will be made after the first meeting of the Board following the AGM.

The Gaythorne RSL Community Welfare Fund Application Form is to be used for all applications. The form is provided below, the document is also available on the Gaythorne RSL website (www.gaythornersl.com.au/sub branch) or from the Secretary at the Gaythorne RSL.

These requests should be sent to the Secretary at committee@gaythornersl.com.au or by post to **Gaythorne RSL Sub-Branch Inc. PO Box 6361 Mitchelton Qld 4053.** Please provide three (3) copies of the completed application form and supporting documentation.

Acknowledgment of receipt of these requests will be conveyed in the month of receipt, where possible. If additional information is requested the application will be suspended until receipt of the additional information

Successful applicants will be notified within 30 days after the March AGM. Successful applicants may be published in external media and listed on the Gaythorne RSL website.

Please note: Meeting the conditions set out by the Gaythorne RSL does not infer or oblige the RSL to provide financial assistance.

3. Requests

The Gaythorne RSL Community Welfare Fund Application Form is to be used for all applications. Only complete applications will be considered. This information includes:

- a. Details of the Group/Organisation, (Defence Unit, Charity, Community Based Organisation, Sporting Club or an individual with an educational goal);
- b. An indication of specific targeted demographics; such as age, gender, religion or ethnicity;

- c. A clear outline of the sponsorship benefits to the Gaythorne RSL, including a list of media opportunities, signage and increased business;
- d. Any logo exposure to the Gaythorne RSL (not a necessity, but a bonus);
- e. Media articles relating to past events;
- f. A supporting letter from a parent organisation stating full support for the function or the event:
- g. Details of any affinity with the Gaythorne RSL;
- h. Details of other organisations approached;
- i. If this is a one-off event or recurring;
- j. Evidence of your standing as a non-profit organisation, charity or community-based organisation;
- k. Current Balance Sheet

4. Eligibility Criteria

To be eligible for sponsorship the applicant must:

- a. Be situated within the acknowledged demographical area of the Gaythorne RSL;
- b. Carry out business within the same area;



Successful Applicants

Successful applicants for Sponsorships will be notified within 30 days after the AGM in March.

There will be a Community Sponsorships Awards Ceremony held in the club at which all the groups will be presented with their cheques.

Successful applicants may be published in external publications, media and listed on the Gaythorne RSL website for public information.



Returned and Services League of Australia (Queensland Branch) Gaythorne Sub-Branch Inc.

Community Welfare Fund

Sponsorship Application

Applicants should read the Funding Guidelines carefully before completing this Application Form. Answer each question carefully and submit three (3) copies of Application and requested documentation no later than 31 October annually. Address applications to:

The Secretary

Gaythorne RSL Sub-Branch Inc.

PO Box 6361

MITCHELTON Qld 4053

Email: committee@qaythornersl.com.au

Name of Organisation:	
Postal Address: _	
Phone Number: _	
Email Address: -	
•	nisations approached:
Bank Account Detai	ls (if applicable):
Name of account:	
Bank:	
BSB Number:	
Account Number:	

Contact person details: (business nours)	
Name:	
Phone Number:	
Email address:	
Date of Event:	
Type of Event:	
Amount requested: \$	
Primary use of the sponsorship:	
Is this a one-time application? Yes \(\square \) No \(\square \)	
Is this an annual/on-going event? Yes ☐ No ☐	
If "yes" please provide future event dates:	
Please complete this form and include your written submission separately.	
Office Use Only:	
Date received:	
Approval: Yes	
Notified: Yes No Date:	
Date request to be forwarded:	