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(KA OFFICE USE ONLY)

This application form is to apply for funding from the Karting Australia Safety Grants Program.

Completed Applications must be submitted by email to [Admin@Karting.net.au](mailto:Admin@Karting.net.au) in accordance with the Guidelines for Application of Karting Australia Safety Grants that can be found at [www.karting.net.au/karting-australia/safety-grants](http://www.karting.net.au/karting-australia/safety-grants)

LATE APPLICATIONS WILL NOT BE ACCEPTED

## APPLICANT DETAILS

<b>NAME OF APPLICANT</b>			
<b>CONTACT PERSON FOR APPLICANT</b>			
<b>POSITION</b>			
<b>EMAIL</b>			
<b>MOBILE</b>		<b>TELEPHONE</b>	

## APPLICATION CHECKLIST

The following checklist is provided as a guide to assist the Applicant in completing this Application Form. Tick if complete/yes:

Are all parts of this application form completed in full?	
As a Club, we comply with the National Club Affiliation Requirements (A14)	
As a Club we have achieved KARM level 1 status	
Have we included quotes for the supply of any goods or services we have included?	
Does our application demonstrate a benefit to Karting Safety?	
Have we included a copy of the Club/Association* official bank statement detailing our Bank details? *Delete whichever is not appropriate.	
Is what we are applying for eligible for funding?	

## GENERAL PROJECT/PROGRAM INFORMATION

TO BE COMPLETED BY A CLUB MAKING AN APPLICATION  
**Where Will The Project Occur?**

<b>FACILITY NAME</b>			
<b>FACILITY ADDRESS</b>			
<b>LOCAL GOVERNMENT AREA</b>			
<b>LAND TITLE DETAILS</b>			
<b>WHO OWNS THE LAND (i.e. CROWN, COUNCIL, PRIVATE)</b>			
<b>STATE</b>		<b>POSTCODE</b>	
<b>DESCRIBE THE CLUB'S TENURE OVER THE LAND</b>			
<b>LENGTH OF TENURE</b>	<b>START DATE</b>	<b>END DATE</b>	
<b>PROJECT TIMELINES (ESTIMATE ONLY)</b>	<b>START DATE</b>	<b>FINISH DATE</b>	

**PROVIDE AN OUTLINE OF WHAT YOUR PROJECT INVOLVES**

Your outline should include but not be limited to what your project is; what the benefit to karting safety will be; the duration of the project; and how the project will be delivered. If there is insufficient space provided please attach the relevant and remaining information to this application.

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**ARE THERE ANY OTHER ORGANISATIONS INVOLVED IN THE PROJECT?**

Any partner organisations should supply a letter of support which must be attached to this application. ***The State Association is NOT required to be added to this list.***

PARTNER ORGANISATION NAME (E.g: Sponsor, benefactor, contractor)	TASK / SKILL / EXPERTISE

**HOW WILL YOU EVALUATE THE PROJECT'S OUTCOMES?**

What method will be used and what measures will be considered a success? How will you demonstrate to external parties whether the project was a success or not (***OTHER THAN HEARSAY***)?

If there is insufficient space provided please attach the relevant and remaining information to this application.

**ONCE THE PROJECT IS COMPLETED HOW WILL IT IMPROVE SAFETY AT YOUR CLUB OR IN YOUR STATE?**

Explain how the project will be sustainable and assist you in improving the track safety at your Club?

If there is insufficient space provided please attach the relevant and remaining information to this application.

**PROJECT BUDGET OVERVIEW**

- The Club must contribute equal to, or more than the amount of funding they are seeking from KA.
- This must be in the form of cash and can include expenses the club will incur in delivering the project. Please note the list of items that are not eligible for funding. These are not able to be included in the budget overview.
- When reporting on the grant, you will be required to document all of your expenses.

**(ALL AMOUNTS LISTED BELOW MUST BE INCLUSIVE OF GST)**

**TOTAL PROJECT COST**

**AMOUNT REQUESTED FROM KA**

**CONTRIBUTION FROM OTHER ORGANISATIONS**


**PROJECT BUDGET**

Please list all anticipated costs of your activity in as much detail as possible which includes all expense items for the project

EXPENDITURE ITEM (E.g: Equipment, Labour, Freight)	PROPOSED AMOUNT	FUNDING SOURCE (E.g: Cash/Contra)
<b>TOTAL EXPENDITURE</b>	<b>\$</b>	

**DECLARATION**

**DECLARATION BY AUTHORISED PERSONS**

1. I am duly authorised by the Applicant to prepare and submit this application.
2. The responses in this application and all supporting documents provided are to the best of my knowledge, true and accurate.
3. I understand the information in relation to this project may be made public.
4. Where required, our project will comply with all relevant Rules, Regulations, Standards, Guidelines and Policies of Karting Australia.
5. I understand that, if we receive funding, our organisation will work with KA in the implementation of this project.
6. Should KA determine that any funding issued to the club has not been used in an appropriate manner, KA reserves the right to request repayment in full of the funding or by any other measures it deems necessary.

**Instructions**

- This declaration must be read and signed by two (2) authorised representatives of the Applicant.
- Both representatives must be members of the Club/Association’s Management Committee / Executive.

<b>SIGNATURE 1</b>		<b>SIGNATURE 2</b>	
<b>DATE</b>		<b>DATE</b>	
<b>NAME</b>		<b>NAME</b>	
<b>POSITION</b>		<b>POSITION</b>	

**STATE ASSOCIATION USE ONLY**

<i>Received by:</i>		<i>Date:</i>		<i>Signature:</i>				
<i>Considered by:</i>		<i>Date:</i>		<i>Recommended</i>	<b>YES</b>		<b>NO</b>	
<i>If 'YES' forwarded to KA on:</i>		<i>Date:</i>		<i>If 'NO' returned to Club on:</i>	<i>Date:</i>			