



# MEMBERSHIP APPLICATION FOR REGIONAL EVENT (M1)

This form is for **support groups** to request funding for events from the Regional Committee. The support group will need to fill this out and **submit it to their Regional Coordinator at least one month before the event** to ensure enough time for approval and advertisement. Reimbursement will be made when receipts have been received.

## Section A - Details

Name of support group:	
Name of organiser:	
Contact phone:	
Contact email:	

Name of Event:	
Date:	
Time:	
Venue:	
Number of caregivers expected to attend:	
Number of children expected to attend:	
Event overview:	

## Section B - Funding

Amount applied for:	
What will these funds be used for:	Venue Hire \$ Catering \$ Entertainment \$ Printing \$ Travel \$ Accommodation \$ Miscellaneous \$ <b>TOTAL</b> \$

How will these funds be paid?

- On GST invoice
- Reimbursement on receipt

## Section C – Health & Safety

We confirm that the following requirements will be followed:

- Sign in sheet on site.
- Health & Safety responsibilities are assigned to a designated person/people.
- A first aid kit will be present at the event.
- A system is in place for the assessment, identification and control of hazards.
- Emergency procedures understood for the venue.

**Section D – Committee Discussion**

Discussion with Committee:
Proposal Accepted/Declined:

Signature:	
Name:	
Date:	

**National Office Use Only:**

<b>Approval</b>	<b>Signature:</b>	<b>Date:</b>
Approved by Manager Training & Support:		
Approved by Finance:		

<b>Final Approval</b>	<b>Signature:</b>	<b>Date:</b>
Approved by Marketing:		

(This number must be used as order number or written on receipts)

Approval/Order number: **M1-**\_\_\_