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Auckland City Council Event sponsorship application form

Name of applicant:	
Name of applicant organisation:	
Applicant's relationship to the applicant organisation:	
Postal address of applicant organisation:	
Courier address of applicant organisation:	
Telephone:	Fax:
Mobile:	Email:
Website:	
Name of Event:	
Date(s) of Event:	
Time(s) of Event:	
Is the Event a:	
one-off	<input type="checkbox"/>
annual	<input type="checkbox"/>
every 2 years	<input type="checkbox"/>
other – specify	<input type="checkbox"/>
Location or Venue of Event:	
Will the Event be held:	
within Auckland City boundaries	<input type="checkbox"/>
OR	
so that a significant proportion of the event activity is within Auckland City boundaries?	<input type="checkbox"/>
Which category of sponsorship are you applying for?	
Category 1	- <input type="checkbox"/> Amount requested \$.....
Category 2	- <input type="checkbox"/> Amount requested \$.....
Category 3	- <input type="checkbox"/> Amount requested \$.....

Attendances at previous events		Year:	Attendance:
Total Expected Attendance (best estimate but please do not exaggerate):			
<i>Total Numbers Expected</i>	<i>Auckland</i>	<i>From outside Auckland</i>	<i>Overseas</i>
Participants:			
Spectators:			
Other, specify below			
Accommodation:			
Number of beds		Number of nights	
Will all accommodation be located in Auckland City Council boundaries? If not, where?			
Please indicate whether hotels or other:			
What is the anticipated average stay in Auckland for participants?			

Is the applicant organisation a legal entity?			
Company	<input type="checkbox"/>	Partnership	<input type="checkbox"/>
Incorporated Society	<input type="checkbox"/>	Sole Trader	<input type="checkbox"/>
Trust	<input type="checkbox"/>	Not-for-profit	<input type="checkbox"/>
If not, please detail:			
Is the applicant organisation GST registered? <input type="checkbox"/> yes <input type="checkbox"/> no			
What insurance do you carry?			
Public Liability	<input type="checkbox"/>		
Other	<input type="checkbox"/>	Specify	_____
Amount of Insurance: \$			

Does the Event have a full time event organiser and/or organisation team?	
YES	<input type="checkbox"/>
NO	<input type="checkbox"/>
Is the event organisation and/or organisation team paid or voluntary?	
Is there a contract in place between the Event organiser or organisation team?	
YES	<input type="checkbox"/>
NO	<input type="checkbox"/>
Does your organisation hold intellectual property rights to the Event?	
YES	<input type="checkbox"/>
NO	<input type="checkbox"/>
If another organisation holds the intellectual property rights, please detail here:	

I confirm that the information provided to the Council is true and complete.
I confirm that I am authorised to make this application on behalf of the Organisation.
I acknowledge that if the Council accepts this Application, there will be:

- review meetings; and
- reporting requirements as conditions of its sponsorship.

Dated: _____

Signed by: (name) _____

(signature) _____

For and on behalf of:
(organisation) _____

That's it. Filling in this form in detail is very important, as this is public money for which a high degree of accountability is required. Please also remember that this is a sponsorship, not a grant. If you have any questions, please contact Auckland City Council. Forward your application to:

<p>Auckland City Council City Events Group <i>Programme manager, event sponsorship</i> Private Bag 92516 Wellesley Street AUCKLAND 1141</p> <p>Tel: (09) 354 2169 Fax: (09) 368 4315 Email: eventsponsorship@aucklandcity.govt.nz</p>	<p>Please ensure you have:</p> <ol style="list-style-type: none"> 1. completed all information requested in this application form; 2. attached all relevant documents; and 3. provided two copies of your application (include one unbound copy on plain paper).
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