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* indicates a required field

Organisation or Institution Details

Please read the <u>guidelines</u> before starting an application.

If you are unsure if your request meets our guidelines, please contact our Kids Support Team on <u>kidssupport@varietyqld.org.au</u> or 07 3907 9300.

Name of Organisation or Institution *

Organisation Name

Address *

Address

Suburb	State	Postcode
Must bo s	n Austral	ian pasteada

Must be an Australian postcode.

Phone Number *

Must be an Australian phone number.

Website URL *

Applicant Admin Contact *

Title First Name Last Name

Applicant Admin Contact Primary Phone Number *

Must be an Australian phone number.

Applicant Admin Contact Primary Email *

Must be an email address.

Please provide a brief description of your organisation: e.g. Primary School; Special School etc *

Financial, general, key points, geographical impact.

Establishment Date *

Must be a date. Year organisation or institution was established - 01/01/YYYY is okay

What is your mission statement or charter? *

Total Number of children catered for at the school. *

Age Range: *

Number of children living with disability or disadvantage *

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* indicates a required field

Equipment / Assistance Applying For

FUNDamentals FOR SCHOOL KIDS

This question is read only.

How will this assistance help your school?

How many children will likely benefit from the supply of this assistance? *

Must be a number.

Value including GST *

\$ Must be a dollar amount.

Does your organisation have a Fundraising Department? * ○ Yes ○ No If yes, what is your annual revenue from fundraising?

\$ Must be a dollar amount.

Are these funds accessible to your department/project area without impacting on other areas of need in the school? ⊖ Yes

○ No

Are you able to make a financial contribution towards the cost without impacting on other areas of need in the school? ○ No

⊖ Yes

If yes, how much?

\$ Must be a dollar amount.

Has Variety previously assisted your organisation? ⊖ Yes O No

If yes, amount of previous assistance?

\$ Must be a dollar amount.

Date of previous assistance:

month and year

Nature of appeal

please outline previous assistance received.

Have you approached any other sources for financial assistance? ⊖ No ⊖ Yes

If Yes, Please provide details or provide attachments

Attach a file:

Our most successful way of raising money is to demonstrate, by way of images and personal accounts, how donations are making a positive impact on the lives of children in need - there is nothing more powerful than seeing the beautiful smiles of the children we strive to assist. Allowing us to tell your story and keep in touch provides our sponsors and supporters with an insight into the work Variety undertake and encourages more donations and support. This then helps us achieve our mission to help sick, disadvantaged and special needs children to live, laugh and learn.

We may wish to use these images in our promotional material.

If your application is approved, how will you acknowledge Variety's contribution?

Newsletters, PR, Website, Social Media

Please attach a photo of your school or logo to be used for fundraising purposes * Attach a file:

I, on behalf of the organisation or institution acknowledge that this agreement permits Variety to use the materials in all forms of media including, but not limited to annual magazine, event flyers, brochures, digital, electronic or print media.

○ I agree

○ I do not agree

I consent to Variety collecting the information provided on this form. I understand that if I do not provide the information requested, I may be ineligible to receive assistance from Variety. *

 \bigcirc Confirm