

Athlete Travel Subsidy Form

Form Preview

Athlete Travel Subsidy

* indicates a required field

About the Athlete Travel Subsidy Program

The Athlete Travel Subsidy helps young local athletes, by providing financial assistance for travel and accommodation to state or national competitions.

Please follow this [link](#) for more information about the program.

Emerging athletes who permanently reside in the Shire of Harvey and are under the age of 21 years at the commencement date of the event that they have been selected to participate in are invited to apply.

Category 1 includes Athletes that have been selected as a member of a State team travelling to represent Western Australia at a national championship event or equivalent.

Category 2 includes Athletes that have been selected as a member of a National team travelling to represent Australia at an international sporting competition.

Exclusions

The following items are not eligible for the Athlete Travel Subsidy:

- Medical or physiotherapy costs
- Travel or accommodation costs where an athlete has chosen to represent the State or have qualified to represent the State but have not been selected by the State Sporting Association
- Travel or accommodation costs for participation in an event or competition that does not form part of the recognised State Sporting Association or National Sporting Organisation Pathway
- Applications for travel and/or accommodation costs for events that have already occurred
- Only one application per athlete per year will be considered for support
- Athletes competing as part of a State School team or Special Olympics State team are only eligible if the State School or Special Olympics.

Athlete Information

Athletes Name

Is the athlete under the age of 21 at the time of the program or event?

- Yes
 No

Is the athlete a permanent resident in the Shire of Harvey?

- Yes

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No

Athletes who attend school or university and are boarding out of the Shire are eligible to apply.

What is the residential address of the Athlete?

Athletes who attend school or university and are boarding out of the Shire are eligible to apply. Please name the school or university if attending.

Please upload document to verify athletes residential address *

Attach a file:

A minimum of 1 file must be attached.

This may include rates notice or similar document of person completing this application.

Sport and Competition Details

Has the athlete been selected by the State or National Sporting body to represent Western Australia or Australia? **

Yes

No

If No, you are not eligible to apply. A clear selection process entitling the person to represent the State or National body must be demonstrated. A letter of selection from that State or National body must be supplied with this application.

Is the athlete currently a registered member of a club or association that is affiliated with a State Sporting Association that is deemed eligible by the Department of Local Government, Sport and Cultural Industries

Yes

No

Please provide written confirmation of the Athletes nomination for the event or program that funding is being requested for. *

Attach a file:

A minimum of 1 file must be attached.

Please name club or association that the Athlete is affiliated with for this application

What event will the Athlete be attending, including name of event, location and date.

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Amount Requested Category 1: Selected as a member of a State team travelling to represent Western Australia at a national championship event or equivalent.

\$

Must be a dollar amount.

Total amount for Cat 1 is \$150 per year

Amount Requested Category 2: Selected as a member of a National team travelling to represent Australia at an international sporting competition.

\$

Must be a dollar amount.

Total amount for Cat 2 is \$250 per year

Total amount requested

\$

Must be a dollar amount.

What is the estimated total cost for travel and accommodation for this event

\$

Must be a dollar amount.

Creditor Information

Please complete this section to receive payment of the subsidy requested.

Bank Account for payment of subsidy

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

Upload copy of Bank Deposit Slip or Statement Header to verify account details *

Attach a file:

Does the athlete have an ABN? *

Yes

No

If the Athlete does not have an ABN, you will need to nominate the reason in the next question

Reason/s for not quoting an ABN: The supplier (athlete) is an individual and has given the payer a written statement to the effect that the supply is either: *

made in the course or furtherance of an activity done as a private recreational pursuit or hobby, or

wholly of a private or domestic nature (from the supplier's perspective).

Under pay as you go (PAYG) legislation and guidelines administered by us, the named supplier (athlete) is not quoting an ABN for the current and future supply of goods or services for the reason or reasons indicated above. *

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- Yes
- No

Certification and Submission

- I declare that all of the information supplied in this application and attachments is true and correct.
- I will notify the Shire of Harvey of any changes to the information supplied or to circumstances arising that are relevant to this application.
- I understand that this is an application only and may not necessarily result in funding approval.
- I give permission for the Shire of Harvey to contact any person or organisation relevant to the assessment of the application and understand that information may be provided to other agencies, as appropriate.
- I understand that the decision made by the Shire of Harvey is final and not subject to an appeals process.

I understand that if the Shire of Harvey approves funding:

- I will be bound by the contents of this application to carry out the activities described in this application, which will form part of the contractual agreement with the Shire.
- I will be required to accept the conditions of funding in accordance with Shire requirements.

If successful:

- The Shire does not accept any liability or responsibility for the activity or event.

Please fill in your details below as your endorsement of this application and the statements above.

I have read and agreed to the above declaration statements *

- Yes

Date *

Must be a date.

Name of person completing this application (if Athlete under age of 16) *

Relationship to Athlete *

Email address *

Phone Number *

Application Outcome

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Application Number

This field is read only.
The identification number or code for this submission.

Decision

This field is read only.
Current decision status of this submission.

Total Amount Allocated

\$
This field is read only.
The total amount of funding allocated for this submission.

Decision Date

This field is read only.
Date the decision was made.