



# Junior Sporting Grant - Club

**In accordance with the application guidelines you are required to verify the following:**

The applicants have been selected as:

- Queensland representatives participating in a National event, or
- Australian representatives participating in an International event

The applicants are residents of Mackay Regional Council area

The applicants are amateur sports people

The applicants are no older than 21 years of age at the conclusion of the event

The event is recognised as a National or International event by the relevant National or International body

Sporting events must be outside the Local Government boundaries of Mackay, Whitsunday, and Isaac

Please tick

**If you do not answer yes to all of the above questions, you are not eligible to receive a Junior Sporting Grant**

Mackay Regional Council is collecting your personal information in order to process your application. This information will only be disclosed to any other third party with your written authorisation or as required by law.

<b>Details of club applicant</b>	Name of Club	
	Postal Address	
	Phone	Fax
	Name of Club Contact Person	Position
	Home Phone	Work Phone
	Email Address	Fax
<p>I declare that I have read the Application Guidelines and verify to the best of my knowledge that the information relating to this application is true and correct.</p> <p>If this application is approved, I give permission for details of our organisation and the purpose of the funding to be provided to the media in order to promote the grants program.</p> <p>Signature _____ Date / /</p>		
<b>Event details</b>	Full Name of Event	
	Location of Event	Date of Event / /
	Name of State/National Sporting Organisation	
	Contact Person	Phone
	Postal Address	
<b>Details of performance leading to selection</b>	_____	
	_____	
	_____	
<b>Details of costs associated with this selection</b>	_____	
	_____	
	_____	

**Details of contributions / subsidies from clubs / associations or any other sources towards cost of representation**


**In accordance with the application guidelines you are required to provide the following supporting documentation and attach it to this application.**

Please tick

Evidence that the applicants are selected as **Queensland representatives** (letter from sanctioning body, eg. Qld Cricket)

Or

Evidence that the applicants are selected as **Australian representatives** (letter from sanctioning body, eg Aust Cricket)

**Evidence of verification of costs of the competition** (letter from team management noting team fees, travel costs, etc)

**If this information is not attached to your application, it will be deemed ineligible and returned to the applicant.**

**Athlete / Guardian Declaration**

I declare that I have read the Application Guidelines and am eligible to apply for a Mackay Regional Council Junior Sporting Grant and that the information relating to this application is true and correct.

I declare that I am aware of this application made on my behalf by my sporting club.

If this application is approved, I give permission for my details and the purpose of the purpose of the funding to be provided to the media in order to promote the grants program.

<b>Applicant</b>	Name	Age
	Signature	Date / /
<b>Parent or guardian</b> (if under 18 years of age)	Name	
	Signature	Date / /
<b>Applicant</b>	Name	Age
	Signature	Date / /
<b>Parent or guardian</b> (if under 18 years of age)	Name	
	Signature	Date / /
<b>Applicant</b>	Name	Age
	Signature	Date / /
<b>Parent or guardian</b> (if under 18 years of age)	Name	
	Signature	Date / /
<b>Applicant</b>	Name	Age
	Signature	Date / /
<b>Parent or guardian</b> (if under 18 years of age)	Name	
	Signature	Date / /

**Office Use Only**

Application Eligible:  Yes  No

Applicant eligible to receive: \$ \_\_\_\_\_

DCS Approval: \_\_\_\_\_

Date: \_\_\_\_\_

You are required to complete **one** of the following forms. Please read for more information.

**1. Statement by a supplier.**

- To be completed if you have **no ABN and are not registered for GST.**
- Please tick one category only.
- There are penalties for making a false declaration on this form.
- If you do not qualify for one of the categories, 48.5% of the payment is required to be withheld and forwarded to the Australian Tax Office. You will then need to claim this amount in your next tax return.

**2. Agreement for creation of a tax invoice on behalf of a payee.**

- To be completed if you **have an ABN and are registered for GST.** ( This will allow Council to generate a Tax Invoice on behalf of the supplier and therefore conform to ATO procedure.)

**3. Declaration by a Supplier – ABN (Not registered for GST).**

- To be completed if you **have an ABN but are not registered for GST.**

**NOTE: If you are still unsure in regard to your circumstances relating to GST contact the Australian Taxation Office.**

**AGREEMENT FOR CREATION OF A TAX INVOICE  
ON BEHALF OF A PAYEE**

ABN Number	
Name of Payee	
Address of Payee	
Telephone Details	
Purpose of Payment	

**NOTE: Where the ABN is not supplied Mackay Regional Council is obliged to deduct 48.5% of any payments for the above purpose and remit it to the Australian Taxation Office. You will be then required to claim this amount in your annual taxation return.**

In order for Mackay Regional Council to create a tax invoice on your behalf ("RCTI") for the above supply, Mackay Regional Council and the Payee/s agree that Mackay Regional Council can issue tax invoices in respect of the supplies on the following conditions:-

- The Payee/s will not issue tax invoices in respect of the supplies;
- The Payee/s acknowledges that it is registered for GST and that it will notify Mackay Regional Council if it ceases to be registered;
- Mackay Regional Council acknowledges that it is registered for GST and that it will notify the Payee/s if it ceases to be registered or if it ceases to satisfy any of the requirements of the RCTI Ruling issued by the Australian Taxation Office; and

This authority remains in place unless it is amended **in writing** by the Payee/s.

I hereby certify the information in this authority is correct and the ABN quoted is the ABN of the Payee/s identified in this authority.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20

.....

Signature of Payee/s

.....

Signature of Payee/s



Statement by a supplier

Complete this statement if the following applies:

- you are an individual or a business
you have supplied goods or services to an other enterprise (the payer), and
you are not required to quote an Australia business number (ABN).

Payers must withhold 46.5% of the total payment it makes to you for a supply that you make as part of your enterprise you carry on in Australia, unless an ABN has been quoted or there is no need to quote an ABN.

HOW TO COMPLETE THE STATEMENT

- Print clearly in BLOCK LETTERS using a black pen only.
Use BLOCK LETTERS and print one character in each box.
Place X in all applicable boxes.

Grid for printing characters: S M I T H S T

Payers can check ABN records of suppliers by visiting www.abr.business.gov.au or phoning 13 72 26 24 hours a day, 7 days a week.

Section A: Supplier details

1 Your name?

Grid for entering name: 26 boxes

2 Your address?

Grid for entering address: 26 boxes

Suburb/town, State/territory, Postcode fields

3 Your reason/s for not quoting an ABN? Place X in the appropriate box/es.

- The payer is not making the payment in the course of carrying on an enterprise in Australia.
The supplier is an individual aged under 18 years and the payment does not exceed \$120 a week.
The payment does not exceed \$75, excluding any goods and services tax (GST).
The supply that the payment relates to is wholly input taxed.
The supplier 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).
The supply is made by an individual or partnership without a reasonable expectation of profit or gain.
The supplier is not entitled to an ABN as they are not carrying on an enterprise in Australia.
The whole of the payment is exempt income for the supplier.

Section B: Declaration

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

Name of supplier (or authorised person)

Grid for entering name of supplier: 26 boxes

Signature of supplier (or authorised person)

Signature box

Daytime phone number

Grid for entering phone number: 10 boxes

Date

Grid for entering date: Day, Month, Year

Penalties apply for deliberately making a false or misleading statement.

Do not send this statement to the Tax Office. Give the completed statement to any payer that you are supplying goods or services to. The payer must keep this document with other records relating to the supply for 5 years.

**DECLARATION BY A SUPPLIER – ABN ( NOT REGISTERED FOR GST )**

<b>NAME OF SUPPLIER</b>	
<b>ADDRESS OF SUPPLIER</b>	
<b>ABN</b>	

**I hereby certify that the information and ABN quoted above is correct and that the above named supplier is not registered for GST.  
Therefore GST is not required to be paid for a supply.**

<b>Name of Authorised Person (if not the supplier)</b>	
<b>Signature of Supplier or Authorised person</b>	
<b>Date</b>	