

2025/2026 Community Capital Requests Grant Application Form

Form Preview

Eligibility

* indicates a required field

Applicants: please note

The City of Bayswater Community Capital Requests Grant is aimed at City of Bayswater Sporting and Community Organisations planning to improve City-owned facilities and infrastructure, that benefits on-going operations for their clubs and groups.

Applicants can apply for up to a maximum of three projects, with preference to projects valued between \$5,000 - \$20,000 and applicants matching a minimum of 25% of the total project cost.

The following information will need to be completed prior to consideration of the request by the City of Bayswater.

- The intent of this form is to fully clarify what your proposed project is and the intended outcomes.
- Projects will be assessed for consideration as part of the City of Bayswater Annual Capital Works program.
- Submitting an application does not guarantee funding/support towards the project.
- Any approved funds will be available from mid-July 2025.
- Before completing this application form, please read the FAQ document [here](#).
- Incomplete applications and/or applications received after the closing date will not be considered.

If you have any questions please contact the Project Services team on 08 9208 2430.

Confirmation of Eligibility

Before proceeding, please confirm the following:

- you have read and understood the program guidelines
- your club/organisation has not received funding through the Community Capital Requests Grant last year's application (i.e if a club successfully received funding in 2024/2025, they are unable to apply for the 2025/2026 round. Those organisations can apply in the 2026/2027 round).
- you have **two (2)** written quotations that will be attached to your submission
- you are able to demonstrate alignment between your project and the aims of this program
- your organisation is a not-for-profit organisation
- your organisation is incorporated, or is auspiced by an incorporated organisation for the purposes of this application
- your organisation is located in the City of Bayswater
- you have contacted City officers to discuss your club's project

You must confirm that all statements above are true and correct. *

☐ Yes

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Applicant Details

* indicates a required field

Applicant Details

Club/Organisation Name *

Organisation Name

Make sure you provide the same name that is listed in official documentation.

Club Address

Address

Project Contact *

Title

First Name

Last Name

Position *

Phone number *

Must be an Australian phone number.

E-mail address *

Must be an email address.

Club/Organisation website

Must be a URL.

Is your club or organisation currently incorporated? *

- ☐ Yes
☐ No

Is your club or organisation currently registered for GST? *

- ☐ Yes
☐ No

Do you have an ABN? *

- ☐ Yes
☐ No

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Applicant ABN

ABN

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

Membership

Please provide membership numbers for your club/organisation for the past three years.

Senior 2022/2023

Must be a number.

Junior 2022/2023

Must be a number.

Other 2022/2023

Must be a number.

Senior 2023/2024

Must be a number.

Junior 2023/2024

Must be a number.

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Other 2023/2024

Must be a number.

Senior 2024/2025

Must be a number.

Junior 2024/2025

Must be a number.

Other - 2024/2025

Must be a number.

Project Background

* indicates a required field

Facility Details

Does your club have a lease agreement with the City? *

- ☐ Yes
☐ No

Are all clubs within your association or committee working together for the project? *

- ☐ Yes
☐ No

Is the project supported by the committee or association named within the lease agreement of your facility? *

- ☐ Yes
☐ No

Attach a copy of your club's most recent AGM approved minutes? *

Attach a file:

Has your club received Community Capital Grant Funding in the last three years?

*

- ☐ Yes
☐ No

Previous Funding

What year did you receive funding?

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Sports/Community Group benefits

List all the main sports, activities and clubs/groups that will benefit from the project and how? *

Project Details

* indicates a required field

If you are applying for multiple projects, you are required to complete an application form for each project and assign a priority number for each project.

Project Priority *

Must be a number.

Project Description *

Must be no more than 25 words.

Provide a name for your project/program/initiative. Your title should be short but descriptive

Project Criteria

1. Needs Assessment - How did you establish the need for this project? *

2. Community Benefit - How will this project benefit your organisation, increase community involvement, participation and/or physical activity in the City of Bayswater? *

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3. Impact to organisation - Describe how critical this project is to your organisation's core activities and objectives. Also rate the importance from Low (1) to High (10) *

Project Budget

* indicates a required field

Total Project Cost *

\$

What is the total budgeted cost (dollars) of your project?

Total Funding Requested *

\$

What is the funding amount you're requesting as part of this project? Please note, applicants to match a minimum of 25% of Total Project Cost.

Funding Sources (GST Inclusive)

Club contribution - provide supporting evidence *

\$

Must be a dollar amount.

City of Bayswater - amount requested for this project *

\$

Must be a dollar amount.

Other funding - specify (i.e grants, sponsorship etc.) *

Must be a number.

Please attach evidence for any confirmed funding amounts (i.e Club or Other) *

Attach a file:

Declaration, Feedback and Submission

* indicates a required field

Executive Declaration

This section must be completed by an appropriately authorised person on behalf of the applicant organisation (may be different to the contact person listed earlier in this application form).

The Organisation acknowledges and agrees that this Application and information regarding it is subject to the Freedom of Information Act 1992 and that the City of Bayswater may

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publicly disclose information in relation to this Application, including its terms and the details of the Organisation.

The City of Bayswater may wish to provide certain information to the media for promotional purposes. For example the club name, sport, location, funding purpose, project activity and funding amount.

I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant organisation is approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the letter of approval.

I agree *

☐ Yes

Name of authorised person *

Title

First Name

Last Name

Must be a senior staff member, trustee or appropriately authorised volunteer

Position *

Position held in applicant organisation (e.g. CEO, Treasurer)

Contact phone number *

Must be an Australian phone number.

We may contact you to verify that this application is authorised by the applicant organisation

Contact Email *

Must be an email address.

Date *

Must be a date

Feedback and Attachments

You are nearing the end of the application process. Please review your application and click the **SUBMIT** button.

The 2025/2026 Community Capital Requests Grant Application is being delivered online for the first time and feedback below will assist us to ensure the application continues to be a smooth process.

Please indicate how you found the online application process: *

☐ Very easy

☐ Easy

☐ Neutral

☐ Difficult

☐ Very difficult

How many minutes in total did it take you to complete this application? *

Estimate in minutes i.e. 1 hour = 60

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Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.

Project Plans/Drawings *

Attach a file:

Project Quote 1 *

Attach a file:

Project Quote 2 *

Attach a file:

Additional Supporting Documentation (optional)

Attach a file:

Additional Supporting Documentation (optional)

Attach a file:

Additional Supporting Documentation (optional)

Attach a file:

Checklist

- ☐ Approval from President or authorised officer of the Association or Committee named in the lease agreement (if applicable)
- ☐ Application form completed (required)
- ☐ Project plan/drawings attached (required)
- ☐ Copy of most recent club/organisation AGM minutes (required)
- ☐ Met with Project Services onsite prior to quotes for building works or refurbishment
- ☐ Two (2) quotes attached to support each project (required)
- ☐ Other supporting documentation attached (optional)