

Community and Cultural Event Grant Application 2026/2027

* indicates a required field

Grants are available for activities which contribute to a Welcoming and Thriving City

Please read the [Community Grants Guidelines and Terms and Conditions](#) prior to completing the application form.

Notification of Outcome: Applicants will be notified 6 weeks after grant closing date. Proposals must consider this timeframe.

Applicant Details

Applicant Type *

- Not for Profit
- School
- Sports Club

Contact Details

Organisation Name *

Organisation's ABN (If applicable)

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

Operating Address *

Address

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Form Preview

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Contact Person for Application

Contact name *

First Name

Last Name

Position held within the organization *

Contact number (business hours): *

Email address *

Activity Details

* indicates a required field

Event Name *

Location of event if different from operating address

Expected attendance *

Must be a number.

How many people do you expect will attend your event/activity?

Event start date *

Must be a date

Event finish date *

Must be a date

Amount requested: *

\$

Must be a dollar amount.

Up to \$10,000

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Brief event/activity description: *

Describe the event in detail and/or any goods and services you plan to purchase. Provide details of your partners and their role in the event. Please attach an event run sheet and additional detail unless provided below. Refer to the Community and Cultural Event grant listed in the Community Grant Program Guidelines (Section 10) and assessment criteria in (Section 17).

Are you planning to organize a Welcome to Country? *

- Yes (Please provide details)
 No

Name of the Wadjuk Noongar Elder

Please provide the name of the Wadjuk Noongar Elder you intend to engage to deliver the Welcome to Country. (Please include costs in budget 3a if required)

Group Beneficiaries *

Describe your target audience. Describe the consultation/ activities/engagement undertaken to identify that the event is wanted by the community.

Access and Inclusion

Please list the additional steps you will take to ensure equitable access, inclusion, and participation of people with a disability in this event. Include costs in the budget 3a

Activity Detail

* indicates a required field

Project Objectives *

- Create opportunities for shared cultural and artistic expression
- Promote awareness and appreciation of Aboriginal culture and heritage
- Facilitate connections, learning and activities for all
- Build the capacity of your organisation to respond to identified community need
- Foster collaboration between groups, business and stakeholders
- Advocate and deliver opportunities for healthy activity and lifestyles

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Form Preview

- Facilitate and partner to deliver a range of recreation and leisure services/ facilities
 - Collaborate to ensure safe places and spaces for all
 - Nurture connections between people and the places they share
 - Advocate for and deliver well-managed natural areas supporting biodiversity and appropriate recreation
 - Undertake activities to minimise and reuse waste
 - Enhance the health of the Canning River, waterways and surrounding natural areas
 - Reduce reliance on fossil fuels and optimise the use of natural resources
 - Raise awareness and engage with others to protect, respect and enjoy the natural environment
 - Promote and educate the community on sustainability and waste management practices
 - Proactively respond to the impacts of climate change
 - Promote social inclusion and equitable access to all
- Select the objectives which best align with your activity.

How do you believe this grant will impact the local community? *

Consider the short- and long-term benefits of your project, and how it will contribute to community wellbeing, inclusion, participation, or local development.

How will you promote your event to potential attendees and the Canning community?

- social media website media releases Newsletter Other

Website

Must be a URL.

Social Media URLs

Project Budget

Applicants are responsible for securing bookings, permissions, necessary insurances, and statutory compliances e.g. venue bookings, event, health and compliance, planning approvals. Each is to be obtained separately to this grant application through the appropriate section within the City of Canning.

Items totalling \$501 and over **must** include a supplier-issued quote/ screen print.

Budget

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a) List each good or service to be purchased with the grant below \$

Items \$501 and over without a quote will not be assessed. List quote Reference number next to item	
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

Total Grant Request

Total grant request

This number/amount is calculated.

Other Budget

b) List other goods and services to be contributed by applicant including in-kind contributions or other funding. \$

	\$
	\$
	\$
	\$
	\$
	\$

Sources of Funds

c) Please outline how you will pay for the items listed above (total expenditure)

Income \$

City of Canning Grant	\$
Applicant contribution	\$
Other sources... Please list	\$
	\$
	\$

Will your activity generate any income? If yes, how will this be reinvested into the Canning community? If you plan to charge participants to attend the funded activity, please indicate the cost.

Documentation Checklist

* indicates a required field

Please submit the following documentation:

- Download and complete this [Grant Payment Request Form](#)

Your proof of bank details could be a bank statement, letter or screenshot (of your banking app for example), that shows:

- Bank logo
- Name of account holder
- BSB
- Account number

Grant Payment Request Form

Attach a completed Grant Payment Request form *

Attach a file:

Please click on the hyperlink to download and complete the Grant Payment Request form and submit here. <https://canning.smartygrants.com.au/d/files/dlm/8b56b157b8f1eb03751dd8263ca1fde6193bcc7>

Bank Details

Attach copy of the bank statement header or screen shot confirming the bank account details *

Attach a file:

Quotes

Attach supplier issued quotations or screen prints for items of \$501 and greater

Attach a file:

Public Liability Insurance

Attach a copy of your public liability insurance or your auspice organisation's liability insurance *

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Attach a file:

Supporting Documents

Attach any supporting documents

Attach a file:

Declaration

* indicates a required field

I hereby certify that I am authorized to prepare and submit this application.

I have read, and agree to the Community Grant Program terms and conditions as outlined in the [Community Grant Program Guidelines](#).

The information contained herein is to the best of my knowledge true and correct.

Authorised person's name *

First Name

Last Name

Position held in the organization *

Date of declaration *

I confirm that I have read, and agree to the Community Grant Program Terms and Conditions *

yes