

### Sponsorship Application

\* indicates a required field

#### Sponsorships

Screen Tasmania will consider sponsorship proposals from screen-related organisations.

Such sponsorships are assessed on whether the proposal provides direct benefits and potential employment prospects to Tasmanian screen practitioners.

Because of limited funds, and the fact these proposals are highly competitive, sponsorships are NOT guaranteed.

Granting sponsorships depends on:

- availability of funds;
- value for money for local practitioners and Screen Tasmania;
- the promotional opportunities provided to Screen Tasmania;
- if there is a measurable increase in the benefits to Tasmanian practitioners from previous years of sponsorship. If not, then Screen Tasmania is unlikely to re-commit.

#### Name of Event

**Project / Event Title \***

**Purpose of Funding**

If you're successful, how will this funding be used? This brief description will be used in the Grant Agreement. Please keep under 10 words.

**How many years are you applying for sponsorship for? \***

- ☐ One Year  
☐ Two Years  
☐ Three Years

**Start Date of Year One \***

**End Date Year One \***

#### Applicant Overview

**Please indicate your business type \***

☐ Individual

☐ Company

☐ Incorporated  
Association

☐ Other:

Applicants MUST have an ABN to contract with Screen Tasmania.

# Sponsorships 2024

## Form Preview

**You need to have discussed your project with the relevant Screen Tasmania project officer. \***

☐ Alex Sangston ☐ Oliver Potter ☐ PJ Madam

Who did you speak with?

**Are you a Tasmanian Resident or Tasmanian-based organisation? \***

☐ Yes ☐ No

**What level of experience do you have in running events? \***

☐ Entry Level ☐ Emerging ☐ Experienced

Please remember to SAVE your application as you go. Smarty Grants will time you out after 30 minutes of inactivity.

## Contact details

\* indicates a required field

### Applicant

**Applicant \***

Organisation Name

Screen Tasmania only accepts Sponsorship applications from organisations.

**Applicant 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	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

**Applicant Street Address \***

Address

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## Form Preview

Suburb State Postcode

This address is necessary for contractual reasons.

### Applicant Postal Address

Address

Suburb State Postcode

Fill out if your Postal Address is different from your Street Address

### Applicant Phone Number

\*

### Applicant Email \*

### Applicant Website

If applicable

## Organisational Details

The organisation can be a company, incorporated association, or an SPV.

### Organisation Project Contact

Title First Name Last Name

### Position in Organisation

### Phone Number

### If your organisation is a registered company, please upload a scan of your Certificate of Incorporation

Attach a file:

## Event Information

\* indicates a required field

### Event Overview

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## Form Preview

**Please indicate the type of festival or event \***

- ☐ Conference  
☐ Professional Development Event  
☐ Special Event  
☐ Other

If you checked "Other", please describe the event very briefly below

**Other: brief description**

Must be no more than 5 words.

**Where is your event located? \***

**How often do you hold this event? \***

- ☐ One-off event   ☐ Inaugural   ☐ Annually   ☐ Biennial   ☐ Other:

**Please briefly describe who the audience is? \***

Who are you trying to attract?

**Estimated participants \***

**Estimated media opportunities and publicity \***

Please briefly describe the publicity you are planning and how it might be of benefit to the Tasmanian Government and Screen Tasmania.

**Describe what will happen at your event \***

Briefly list (bullet points) the specific activities (200 words recommended)

**List the expected outcomes of the event \***

Please outline the results that will be achieved for practitioners and the industry as a whole, by hosting this event. Must be no more than 500 words

**How will you know if these outcomes have been achieved? \***

And how will you measure these outcomes?

## Event Schedule Upload or Website

Please either upload a pdf or enter a website link.

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## Form Preview

### Event Schedule Upload

Attach a file:

### Event Schedule Website

Must be a URL.

### Event History

**Has this event been funded by Screen Tasmania or any other parts of the Tasmanian Department of State Growth in the past? \***

- ☐ Yes  
☐ No

If you answered "Yes" above, please detail the year(s) in which Screen Tasmania or other parts of the Department Of State Growth provided funding and the amount provided.

Funding agency	Year Funded	Amount Granted
		\$
		\$
		\$

Don't forget to SAVE

## Event Proposal

\* indicates a required field

### Proposal

Applicants are required to demonstrate value for the Tasmanian Screen Industry and Screen Tasmania.

**If you have a proposal document, please use this section to upload it and any other supporting documents.**

Attach a file:

Please label your files with the Event Name and 'Event Proposal' in the title

**Total Amount Requested from Screen Tasmania \***

Must be a whole dollar amount

**Total Event Cost \***

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This is the total cost of the event, including all support and expected income. Must be a whole dollar amount

Please include **below** any other involvement you need from Screen Tasmania, such as providing a speaker, digital assets and publicity via Screen Tasmania channels, etc.

**Are you seeking any other (non-financial) assistance from Screen Tasmania?**

Word count:  
Must be no more than 500 words

**Rationale for event \***

Please outline why you want Screen Tasmania to support your event. Must be no more than 500 words

**How do you intend to use the monetary component of a Screen Tasmania sponsorship? \***

Must be no more than 500 words

### Other Sponsors

Please list other sponsors for this event and indicate their current status. Use the 'Add More' button for additional sponsors.

Sponsor Name	Proposed or Confirmed

### Additional Benefits

**Below is an extract from the standard Sponsorship Letter of Agreement. Please outline *any other benefits* that will be offered to Screen Tasmania - other than those outlined below in the Letter of Agreement.**

*The Recipient will acknowledge Screen Tasmania's support of the Event by:*

- a. The inclusion of Screen Tasmania's logo on all printed, published and electronic promotional material;*
- b. Recognition of Screen Tasmania as a partner (key or otherwise) on all publicity material;*

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c. Recognition of Screen Tasmania's support in media releases by including the words, "... [The Event] is supported by the Tasmanian Government through Screen Tasmania...";

d. Provision of a link on the event's website to Screen Tasmania's homepage if necessary;

e. Use of the following social media handles attached to posts about the Event as appropriate - Facebook: <https://www.facebook.com/pages/Screen-Tasmania-351883021512787> and Twitter: hashtag #screentasmania or @screentasmania; and

f. Screen Tasmania will be offered complementary attendances and the opportunity to display appropriate signage at the event.

### Other Benefits Offered \*

## Risk Analysis

If this is a public event, your organisation may be required by venues to undertake a risk analysis and hold public liability and other insurances.

### If applicable, please upload any Risk Analysis document (s)

Attach a file:

Please name your file with the name of the event and "Risk Analysis".

### If applicable, please upload any current insurance certificates.

Attach a file:

Please name your file with the name of the event and 'Insurance Certificates'

## Remember to SAVE

## Event Team and Marketing Plan

### Team

Please provide details of any event team members, their roles and a very brief indication of their level of experience in delivering such events.

Team Member	Role	Experience

### Marketing Plan - if applicable

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## Form Preview

**Please upload your Marketing Plan or marketing documents (if applicable)**

Attach a file:

Please Save - one page to go...

## Declaration and Affirmation

\* indicates a required field

### Disclosure

#### **Publicity of Assistance**

Unlike private sector financial organisations, the Department of State Growth (the department) disburses public funds and is therefore accountable for the distribution of those funds. As part of the accountability process, the department may publicise the level of its financial assistance including the terms and conditions of the financial assistance as provided in the confidentiality requirements set out in the legal documentation entered into with you.

#### **Right to Information**

You should also be aware that information you provide to the department, and details of any financial assistance package, may be subject to requests for public disclosure under the *Right to Information Act 2009*.

#### **Information Protection**

You are providing personal information to the department which will manage that information in accordance with the *Personal Information Protection Act 2004*. The personal information collected here will be used by the department for the purpose of assessing your application for assistance and related activities. Failure to provide this information may result in your application being unable to be processed, funding being unable to be granted or records not being properly maintained. The department may also use the information for related purposes or disclose it to third parties in circumstances allowed for by law. You have the right to access your personal information by request to the department and you may be charged a fee for this service

**Have you read and understood the confidentiality provisions above? \***

If you select "No", this application will be denied.

### Conflict of Interest

Screen Tasmania is required to identify all relevant financial or personal interests that may exist between Screen Tasmania Expert Advisory Group (STEAG) members or employees of Screen Tasmania, and applicants. This is to ensure that measures can be taken to prevent a conflict of interest arising between those persons assessing the application for Screen Tasmania and applicants. For these purposes, please select the relevant statement below:



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**I/we (the applicant) acknowledge that we DO have a financial and/or close personal relationship with a STEAG member or employee of Screen Tasmania. \***

☐ Agree

☐ Disagree

If you select "Agree", you are affirming there is a relationship which may lead to a conflict of interest or a perception of a conflict of interest. If you are unsure, contact Screen Tasmania to discuss your options on 6165 5070.

## Declaration

I/we acknowledge this submission in no way inhibits Screen Tasmania from becoming involved in or developing other projects which may or may not have various similarities with my project(s).

No agreement, arrangement or obligation shall be deemed to exist between Screen Tasmania and myself/us unless and until a formal contract is made between us.

By submitting this application, I/we affirm that the details provided in this application are true and correct and that I/we have read and understood Screen Tasmania's [General Guidelines](#) and [Terms of Trade](#).

## The End

Thank you for completing this form. Please Save, Review and then Submit the application.