# COOLANGATTA SURF CLUB

## Coolangatta Surf Life Saving Supporters Club Community Raffle Beneficiary Application Form

Organisation Name:
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ABN	(if	applicabl	e):	

Registered Charity/Not-for-Profit Number (if applicable): \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_

Position in Organisation: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_

Website or Social Media (if applicable): \_\_\_\_\_

**Organisation Details** 

Briefly describe your organisation's mission and key activities:

How does your organisation benefit the Coolangatta /Tweed community?

#### **Raffle Participation Details**

Preferred Month for Raffle Participation (subject to availability): \_\_\_\_\_

1.

Brief Story for Promotion (to be published by Coolangatta SLSSC):

#### Acknowledgments & Agreement

- I confirm that our organisation meets the **eligibility criteria** for raffle participation.
- I acknowledge that our organisation will supply at least **two volunteers** dressed in our organisations shirts each week to sell raffle tickets.
- I agree that the monthly raffle **profits (after costs) will be electronically transferred by the 5th working day of the next month**.
- I understand that our organisation may be asked to **participate in a media opportunity** at the end of the raffle month.
- I acknowledge that we will actively **encourage** our members to become Coolangatta SLSSC members.

Signed by:	
Date:	

Position: \_\_\_\_\_

### **Submission Instructions**

Please submit your completed application via email to <u>steve@coolangattasurfclub.com</u> or drop it off to reception **Coolangatta Surf Life Saving Supporters Club**.

For any questions, please contact Steve Edgar via email

Thank you for your interest in partnering with Coolangatta SLSSC to support our local community!