Local Sport Defibrillator Program 2026/27

* indicates a required field

Instructions for Applicants

It is very important that applicants work through the form in sequence, including the eligibility requirements. Questions asked throughout the application are based on your responses provided in the initial sections of the application.

Before you apply, please read the guidelines and related materials to make sure you understand all relevant requirements. You can find the guidelines here.

Application Number

This field is read only.

Program Details

The Local Sport Defibrillator Grant Program is aimed at providing Automated External Defibrillators (AEDs) to NSW sport and active recreation facilities and clubs located in, or servicing, the most disadvantaged areas of NSW.

The NSW Government has allocated up to $500,000 in 2026/27 for this Program.

- Grants of up to $3,000 are available to fund the cost of an approved AED package listed in Appendix A.
- There is no mandatory financial contribution. However, where the cost of the selected package exceeds $3,000, the organisation must fund the additional cost.
- Eligible organisations can only receive funding for one AED package under this round of the Program.

Applications will be assessed in the order they are received. This will continue until the program funding allocation has been exhausted, or the closing date and time occurs.

Grant Program Name

This field is read only.
The program this submission is in.

Key Objectives

The key objectives of the Local Sport Defibrillator Grant Program 2026/27 are:

- To promote wider access to these devices across NSW.
- To support local sport and active recreational clubs or related incorporated organisations located in the most disadvantaged areas of NSW in purchasing an AED package.

Disclaimer

The Applicant acknowledges and agrees that:

- submission of this application does not guarantee funding will be granted for any project, and the Department expressly reserves its right to accept or reject this application at its discretion;
- it must bear the costs of preparing and submitting this application and the Department does not accept any liability for such costs, whether or not this application is ultimately accepted or rejected; and
- it has read the Funding Guidelines for the Program and has fully informed itself of the relevant program requirements.

Use of Information

Information submitted in the application will be shared with the NSW Government. Should your application be successful, the Office of Sport may provide certain information to the media and Members of Parliament for promotional purposes. This information may include applicant name, project name, project description, location of the project, location of the grant recipient and amount funded and total project cost. Information provided in the grant application/milestone and project completion reports may be used to develop case studies including photos. The contact details supplied by the person submitting the application may also be provided to the relevant Members of Parliament.

Service Provider Access to contact details

Names and contact details of successful applicants will also be provided to the AED Service Provider as nominated in the application, to assist in expediting the purchase and supply of the AED package. Successful applicants will have the option of opting to opt out of their details being provided to the nominated service provider. Successful applicants will retain the right to change their choice of AED package and service provider, subject to the approval of the Office of Sport.

I consent for my contact details to be provided to my chosen AED service provider, to assist with expediting the purchase and supply of the selected AED package *

○ Yes ○ No

Privacy Notice

The Office of Sport will collect and store the information you voluntarily provide to enable processing of this grant application. Any information provided by you will be stored on a database that will only be accessed by authorised personnel and is subject to privacy restrictions. The information will only be used for the purpose for which it was collected (or otherwise with your consent). The Office of Sport is required to comply with the Privacy and Personal Information Protection Act 1998. The Office of Sport collects the minimum personal information to enable it to contact an organisation and to assess the merits of an application. Applicants must ensure that people whose personal details are supplied with applications are aware that the Office of Sport is being supplied with this information and how this information will be used. The Office of Sport may engage external service providers to assist it in assessing applications, evaluating grant programs and/or ensuring probity of programs. Any such service provider is required to comply with privacy laws.

Eligibility Criteria

To be considered eligible under the Program, **applicants must meet one** of the following criteria:

1. The organisation primarily operates in, or the majority of participants reside within, a postcode listed in **Appendix C**, as ranked by the Australian Bureau of Statistics in their Socio-Economic Indexes for Areas (SEIFA).

This must be demonstrated by meeting one or more of the following:

- The applicant organisation's registered address* being located within an eligible postcode, or
- Applicants providing clear evidence of their sporting or active recreational activities being primarily undertaken at a facility(ies) in an eligible postcode, or
- Applicants providing clear evidence that a majority of their participants reside in eligible postcodes

*The determination of registered address will be based on the address associated with the applicant organisation's ABN.

OR

1. The applicant organisation does not meet eligibility criteria 1 (postcode-based), but is currently experiencing financial hardship, which must be demonstrated by:

- Providing formal documentation to demonstrate financial hardship showing the organisation's current financial position. Documentation must be one or more of the following:
    - Profit and loss statements and balance sheets
    - Cash flow statements
    - Tax returns and BAS statements
    - Letters from accountants or financial advisers confirming financial hardship.

Eligible Applicants

In addition to meeting the eligibility criteria, eligible applicants are:

- Incorporated, not-for-profit clubs, associations or organisations in NSW that are sport or active recreation related
- State or national sport or active recreation organisations on behalf of member clubs located in NSW

- Licensed sporting or active recreation clubs in NSW, providing that the AED package directly benefits sport and active recreation members or participants
- Sport clubs associated with a school, church or university in NSW providing they are an incorporated not-for-profit club in their own right
- Councils, Service Clubs and other incorporated not-for-profit owners or managers of facilities that are used for sporting or active recreational activities in NSW
- Be one of the following incorporated entity types:
    - Incorporated association registered with NSW Fair Trading
    - Australian public company limited by guarantee
    - Local Aboriginal Land Council
    - Indigenous corporation registered with the Office of the Registrar of Indigenous Corporations
    - trust registered with the Australian Charities and Not-for-profits Commission (ACNC)
    - Non-distributing co-operative registered with NSW Fair Trading

Applicants who have previously received funding under earlier rounds of the Local Sport Defibrillator Grant Program will only be considered if program funds have not been fully allocated by the closing date.

Eligible applicants with an ABN must ensure that the incorporation details and ABN details are for the same organisation.

For the purposes of these Guidelines, active recreation is defined as physical activity for the purposes of relaxation, health and wellbeing or enjoyment which can be self-directed or facilitated by a provider or organisation. All applicant organisations will be required to provide information around the nature of their activities and the population groups they are servicing.

Sport or active recreation clubs at a multi-use facility are encouraged to collaborate on planning for medical emergencies, including the sharing of resources and locating defibrillators to maximise community access.

All applicant organisations will be required to provide information around the nature of their activities and the population groups they are servicing.

Ineligible Applicants

Ineligible applications are any organisation types not listed in the ‘Eligible Applicants’ section include (but not limited to):

- Individuals, groups of individuals and unincorporated organisations
- Organisations/clubs that are not deemed sport or active recreation: community and social groups focused on passive social activities unrelated to sport or active recreation are ineligible
- Organisations who only deliver one-off annual events
- For-profit and commercial organisations
- NSW Government departments and agencies
- Educational institutions including schools and their Parents and Citizens (P&Cs), Universities, TAFE, Colleges and childcare centres
- An organisation named:
    - (i) by the National Redress Scheme for Institutional Child Sexual Abuse on its list of institutions that have not joined or signified their intent not to join the Scheme; or

- (ii) in the Royal Commission into Institutional Responses to Child Sexual Abuse that has not yet joined the National Redress Scheme.

Eligible AED Packages

Applicants must purchase an approved AED package from an approved Service Provider as listed at **Appendix A** of the Guidelines.

Applicants must rely on their own enquiries as to the suitability of the approved AED Service Provider or package for their needs. Each approved Service Provider has developed their own package. Applicants must make their own enquiries as to any additional inclusions beyond the minimum package requirements.

The Office of Sport procurement process ensures that AEDs being purchased with grant funding meet certain minimum standards. At a minimum, the provision of an AED package will include:

- An AED
- AED familiarisation instruction
- A minimum of six years of essential defibrillator maintenance. Note that battery warranties may have a shorter duration.

Ineligible Projects

Projects or project components ineligible to receive funding include:

- Project that is not primarily for use by sport and active recreation facilities or organisation
- Project that does not demonstrate a connection to one of the postcodes listed at Appendix C, except where the applicant has demonstrated they are experiencing financial hardship
- Retrospective funding e.g., projects that have already commenced and/or purchases completed prior to application submission
- Projects already funded by the NSW Government for the same project or same component of a project.
- AEDs purchased from a service
- Provider not listed on the approved list at Appendix A.
- Ongoing maintenance outside of the scope of the six-year essential defibrillator maintenance schedule
- Any extended warranty specified by an approved Service Provider
- Accredited CPR, First Aid, ongoing or additional face to face AED familiarisation instruction except where this is included as part of an approved package
- Out of warranty repair of equipment
- Replacement costs of consumables including batteries and electrode pads
- Replacement or temporary replacement of the AED if it is damaged or unrecoverable through wear and tear, vandalism, accident, theft or misuse
- General first aid maintenance items or equipment (items requiring cleaning and disinfecting after use).

Eligibility Criteria

As the applicant, which method are you using to ensure that you are eligible for this grant? *
○ Our organisation primarily operates in (registered address or location of activity), or the majority of participants reside within, a postcode listed in Appendix C
○ Our organisation is experiencing financial hardship

How can you demonstrate that your Organisation meets this criteria? *
☐ Our organisation's registered address (as per our ABN) is located within an eligible postcode
☐ We can provide evidence that our sporting or active recreational activities are primarily undertaken at a facility(ies) in an eligible postcode
☐ We can provide evidence that the majority of our participants reside in eligible postcodes

Eligibility Confirmation

Please declare this application meets the Program eligibility criteria:

- It has been prepared by and is being submitted by an eligible applicant.
- Applicants will notify the Department if grant funding for this project is secured from another NSW Government source.

Please select your organisation type: *
○ Incorporated, not-for-profit clubs, associations or organisations in NSW that are sport or active recreation related
○ State or national sport or active recreation organisations on behalf of member clubs located in NSW
○ Licensed sporting or active recreation clubs in NSW, providing that the AED package directly benefits sport and active recreation members or participants.
○ Sport clubs associated with a school, church or university in NSW, providing they are an incorporated not for profit club in their own right
○ Councils, Service Clubs and other incorporated and not-for-profit owners or managers of facilities that are used for sporting or active recreational activities in NSW
○ None of the above

I confirm that our organisation and project is eligible according to the criteria outlined in the Program Guidelines *
○ Acknowledged

Check your eligibility

Based on your response to the type of Organisation you are, you are not an eligible applicant. We encourage you to review your response and if you are not an eligible organisation based on the program guidelines, please consider if you should continue to complete the application form.

Contact Details

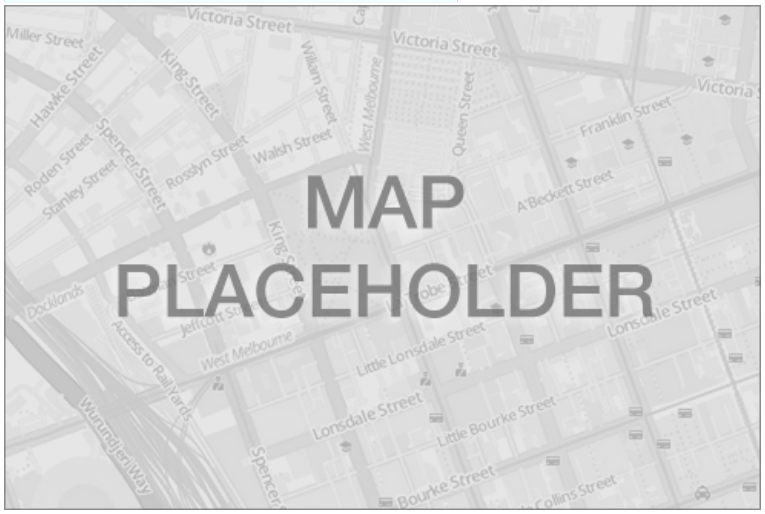
* indicates a required field

Organisation Details

Organisation Name *
Organisation Name

Please use the organisation's full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

Primary Address
Address



Postal Address
Address

Primary Phone Number *

Must be an Australian phone number.
Country code not required, area code for landlines is required.

Other Phone Number

Must be an Australian phone number.
Country code not required, area code for landlines is required.

Email Address *

Must be an email address.

Website

Must be a URL.

Please detail the primary activities of the applicant organisation. *

Word count:
Must be no more than 50 words.
Please include the active recreational activities that your organisation delivers on a regular basis (e.g. Types of programs or services you deliver and Who you work with: participants, partners, communities)

Public Liability Insurance

Organisations approved for funding by this program are required to have a minimum Public Liability Insurance cover of $5 million.

I understand that if the application is successful, the organisation is required to provide a copy of our Public Liability Insurance cover of at least $5 million *

○ Agree

Does the applicant organisation have an Australian Business Number (ABN)? *

○ Yes ○ No

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.

Incorporation Details

Select the entity that your organisation is incorporated with: *

☐ NSW Fair Trading - Incorporated Association
☐ ASIC (Australian Securities and Investments Commission) - Public Company limited by Guarantee
☐ ASIC (Australian Securities and Investments Commission) - Registered Australian Body
☐ ACNC (Australian Charities and Not-for-profits Commission) - Registered Charity
☐ ORIC (Office of the Registrar of Indigenous Corporations) - Indigenous Corporations
☐ Local Government Authority
☐ Other:

Applicant Organisation Incorporation Number: *

Applicants must ensure that the incorporation details and ABN details(if applicable)are for the same organisation and in the name of the applicant organisation. For Local Government Authorities, enter Council name here.

To check your incorporation number, you can search NSW Fair Trading or ASIC:

- NSW Incorporated Associations Register
- ASIC Registers
- ACNC Register
- ORIC

Primary Contact Details

This is the person from your organisation that will liaise with the Office of Sport on various administrative aspects of this application and grant if successful. It is your responsibility to update the Office of Sport of any contact details that may change during the delivery of this project. These are the details that will be provided to the AED provider if you opted in for this on page 1

Primary Contact *

Title | First Name | Last Name

This is the person we will correspond with about this grant.

Primary Contact Position *

e.g., Manager, Board Member or Fundraising Coordinator.

Primary Contact Phone Number *

Must be an Australian phone number.
Country code not required, area code for landlines is required.

Primary Contact Email *

Must be an email address.
This is the address we will use to correspond with you about this grant.

Secondary Project Contact

This person must be different to the Primary Contact. We generally will only contact this person if we can't make contact with the Primary Contact.

Applicant Project Contact *

Title | First Name | Last Name

Applicant Project Contact Position *

Applicant Project Contact Primary Phone Number *

Must be an Australian phone number.

Applicant Project Contact Primary Email *

Must be an email address.

Project Details

* indicates a required field

Title *

Word count:
Must be no more than 25 words.
Provide a name for your initiative. Your title should be short but descriptive.

Brief description *

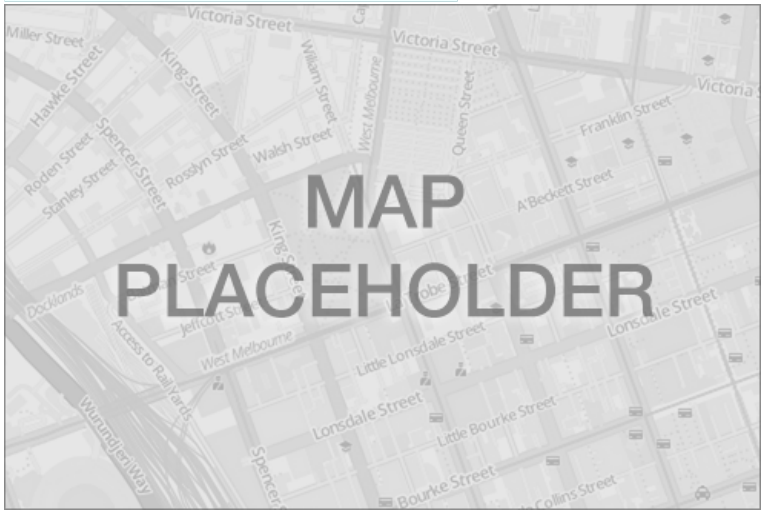
Word count:

Must be no more than 50 words.
Include a brief summary of who will benefit from this initiative, what activities you will do and what outcomes you expect from your activities.

Anticipated start date *

Anticipated end date *

Primary location of your initiative
Address



Primary location does not need to be a specific address, and can be postcode, suburb, state, etc. If delivered online, please specify the area of focus for delivery.

Start and/or end dates entered are outside of those allowed in the Program Guidelines

The Local Sport Defibrillator Program 2026/27 will not retrospectively fund AED purchases.

Review the dates entered and consider if your project is eligible for funding under this program.

Registered Address

To be considered eligible under the criteria, applicants must demonstrate that their registered address is located in a postcode listed in **Appendix C** of the program guidelines, as ranked by the Australian Bureau of Statistics in their Socio-Economic Indexes for Areas (SEIFA).

This must be demonstrated by:

- The applicant organisation’s registered address being located within an eligible postcode.

The determination of registered address will be based on the address associated with the applicant organisation’s ABN.

You can check this by going back to page 2 of the application and check the ABN section.

Evidence of Project Location

To be considered eligible under this criteria, applicants must demonstrate that their sporting or active recreational activities are primarily undertaken at a facility/location that is located in a postcode listed in **Appendix C** of the program guidelines, as ranked by the Australian Bureau of Statistics in their Socio-Economic Indexes for Areas (SEIFA).

This must be demonstrated by:

- Applicants providing clear evidence of their sporting or active recreational activities being primarily undertaken at a facility/location in an eligible postcode.

This can be a evidenced by a statutory declaration, or a letter of support from:

- Your State Sporting Organisation
- Your Local Council
- Your Association
- National Sporting Organisation

Confirm the location where your primary sport/active recreation activities are held *
Address

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

Demonstrate that your organisations sporting or active recreational activities are primarily undertaken at this location. *

Word count:
Must be no more than 250 words.

Upload evidence to support that this is your primary location/clubhouse/facility *
Attach a file:

This could include a Statement of Support from your governing body, or a statutory declaration.
Statement of Support template is located here

Evidence of Majority of Participants reside within Eligible Postcodes

To be considered eligible under this criteria, applicants must demonstrate that majority of their participants reside in a postcode listed in **Appendix C** of the program guidelines, as ranked by the Australian Bureau of Statistics in their Socio-Economic Indexes for Areas (SEIFA).

This must be demonstrated by:

- Applicants making a case that a majority of their participants reside in eligible postcodes.

You can provide a statement of support from your governing body, declaring that over 50% of your members reside within the eligible postcodes (as per **Appendix C** of the program guidelines). If your organisation does not have a governing body, you are able to provide a statutory declaration.

Demonstrate that the majority of your participants reside within eligible postcodes. *

Word count:
Must be no more than 250 words.

Upload evidence to confirm the majority (above 50%) of your organisations membership resides in eligible postcodes as per Appendix C of the Local Sport Defibrillator Program Guidelines. *
Attach a file:

This could include a Statement of Support from your governing body, or a statutory declaration.
Statement of Support template is located here

Evidence of Financial Hardship

To be considered eligible under this criteria, applicants must demonstrate that they are experiencing financial hardship.

This must be demonstrated by:

- Providing formal documentation to demonstrate financial hardship showing the organisation's current financial position.
- Documentation must be one or more of the following:
    - Profit and loss statements and balance sheets
    - Cash flow statements
    - Tax returns and BAS statements
    - Letters from accountants or financial advisers confirming financial hardship.

Financial hardship is not intended to include where an applicant has significant assets or have not elected to prioritise the project within available resources. All assessments of financial hardship will be considered on a case-by-case basis.

Demonstrate that your organisation is experiencing financial hardship, including information about the organisation's current financial position. *

Word count:
Must be no more than 250 words.

Upload evidence to support that your Organisation is experiencing financial hardship. *
Attach a file:

Previous Funding

Organisations who have received funding under a previous round of the Local Sport Defibrillator Program will have assessment of their application delayed until after the program has closed and if there is unallocated funding. Where this occurs, applications will be checked for eligibility in the order that they were submitted.

The Office of Sport will review if your Organisation has received funding for an AED/s under a previous round of the Local Sport Defibrillator Program. *
○ Noted

Applications by a licenced club

Where within your facility will the AED be kept? *

Word count:
Must be no more than 100 words.
Please include proximity of the device to where sport and active recreation activities are conducted.

Applications on Behalf of Another Organsation

Organisation applying on behalf of	Contact person liaised with	Type of Sport

Will there be any other clubs/organisations who will have access to the AED? *
○ Yes ○ No
Consider if other sport or active recreational activities/organisations will be able to access the AED from its proposed location throughout the entire year.

Add details of the clubs or organisations that will have access to the AED device.

Add more rows using **Add More or '+/-'**

Organisation Name	Type of Sport

Organisation Name	Organisation Name

AED Selection

* indicates a required field

Applicants should refer to the details set out in the AED Service Providers' package for listed inclusions when making a choice of provider.

Applicants must rely on their own enquiries as to the suitability of the approved AED Service Provider or package for their needs. Each approved Service Provider has developed their own package. Applicants must make their own enquiries as to any additional inclusions beyond the minimum package requirements.

If successful, funding will only be approved for packages and suppliers listed within this appendix A (using the contact details listed in the Program Guidelines).

AED Devices

A list of approved AED Service Providers and AEDs can be found at Appendix A of the program guidelines.

Please select your device *
- ○ Mindray BeneHeart C1A Semi Auto and Fully Auto
- ○ Mindray BeneHeart C2 Semi Auto and Fully Auto
- ○ Defibtech Lifeline VIEW Semi Auto
- ○ Elliot Fully Automatic
- ○ FRED PA-1
- ○ LIFEPAK CR2 Semi and Fully Auto Packages
- ○ Philips FRx
- ○ Philips HS1
- ○ St John G5
- ○ St John Pocket AED
- ○ St John Powerbeat X3
- ○ Zoll AED Plus Semi-Auto and Fully Auto
- ○ Zoll AED 3 Semi-Auto and Fully Auto

Elliot Fully Automatic Suppliers

Please select supplier *
- ○ Integrity Health and Safety

Integrity Health and Safety Packages

Please select your package *
- ○ Elliot Fully Automatic Defibrillator with Bracket, prep kit and sign - $1,595.00
- ○ Elliot Fully Automatic Defibrillator with indoor cabinet, prep kit and sign - $1,695.00
- ○ Elliot Fully Automatic Defibrillator with pads and batteries - $1,395.00

St John Pocket AED Suppliers

Please select supplier *
○ St John Ambulance

St John Pocket AED Packages

Please select your package *
○ St John Pocket AED + Ready Kit and carry bag - $1,995.00

FRED PA-1 Suppliers

Please select supplier *
○ Cardiac Defibrillators

Cardiac Defibrillators FRED PA-1 Packages

Please select your package *
○ FRED PA-1 Bundle - $1,595.00
○ FRED PA-1 Full Equipment Bundle - $1,850.00

Mindray BeneHeart C1A Semi Auto and Fully Auto Suppliers

Please select supplier *
○ Australian Defibrillators Pty Ltd
○ Australian Red Cross Society
○ Defibshop
○ Integrity Health and Safety
○ The Royal Life Saving Society Australia – NSW Branch
○ Wollongong First Aid

Australian Defibrillators Pty Ltd Packages

Please select your package *
○ Mindray BeneHeart C1A AED - $1,695
○ Mindray BeneHeart C1A AED + Wall bracket OR Soft Carry Bag - $1,795
○ Mindray BeneHeart C1A AED + Outdoor Open Access Alarmed Cabinet - $2,095

Australian Red Cross Society Packages

Please select your package *
○ Mindray BeneHeart C1A-Semi or Fully Auto Unit Only (Unit inc. Carry case + Delivery) - $1,920.00
○ Mindray BeneHeart C1A-Semi or Fully Auto - Basic Package (Unit inc. Carry case + Delivery + AED training + customer support maintenance) - $2,520.00
○ Mindray BeneHeart C1A -Semi or Fully Auto - Value Added Package (Unit inc. Carry case + Delivery + AED training + customer support maintenance + Alarmed wall mounted Cabinet + AED 3D Signage) - $2,888.00

Defibshop Packages

Please select your package *
- ○ Mindray Beneheart C1A – Sport Bundle 19 - $2,295
- ○ Mindray Beneheart C1A – Sport Bundle 20 - $2,395
- ○ Mindray Beneheart C1A – Sport Bundle 21 - $2,595

The Royal Life Saving Society - NSW Branch Packages

Please select your package *
- ○ Mindray BeneHeart C1A AED - $1,995
- ○ Mindray BeneHeart C1A AED with wall bracket or soft carry bag - $2,145
- ○ Mindray BeneHeart C1A AED with wall mount alarmed cabinet - $2,445

Integrity Health and Safety Packages

Please select your package *
- ○ Mindray C1A - Unit Only - $1,765
- ○ Mindray C1A – Indoor Cabinet Package - $1,950
- ○ Mindray C1A – Bracket Package - $1,850
- ○ Mindray C1A 4G - Unit Only - $2,195
- ○ Mindray C1A 4G – Indoor Cabinet Package - $2,450
- ○ Mindray C1A 4G – Bracket Package - $2,350

Wollongong First Aid Packages

Please select your package *
- ○ Mindray BeneHeart C1A AED Semi-Automatic or Automatic inc Soft Carry Bag - $1,885.00
- ○ Mindray BeneHeart C1A AED Semi-Automatic or Automatic with Wall Bracket - $1,912.83
- ○ Mindray BeneHeart C1A AED Semi-Automatic or Automatic with Standard Cabinet - $1,535.40
- ○ Mindray BeneHeart C1A AED Semi-Automatic or Automatic with Alarmed Cabinet - $1,895.00
- ○ Mindray BeneHeart C1A AED Semi-Automatic or Automatic with Coded Cabinet - $2,258.00
- ○ Mindray BeneHeart C1A AED Semi-Automatic or Automatic with ABS Cabinet - $2,158.00
- ○ Mindray BeneHeart C1A AED Semi-Automatic or Automatic with Tough Case - $2,048.00

Mindray BeneHeart C2 Semi Auto and Fully Auto Suppliers

Please select supplier *
- ○ Australian Defibrillators Pty Ltd
- ○ Australian Red Cross Society
- ○ The Royal Life Saving Society Australia – NSW Branch
- ○ Wollongong First Aid

Australian Defibrillators Pty Ltd Packages

Please select your package *

○ Mindray BeneHeart C2 AED - $2,195
○ Mindray BeneHeart C2 AED + Wall bracket OR Soft Carry Bag - $2,295
○ Mindray BeneHeart C2 AED + Outdoor Open Access Alarmed Cabinet - $2,595

Australian Red Cross Society Packages

Please select your package *
○ Mindray BeneHeart C2 - Semi or Fully Auto Unit Only (Unit inc. Carry case + Delivery) - $2,256.00
○ Mindray BeneHeart C2 - Semi or Fully Auto - Basic Package (Unit inc. Carry case + Delivery + AED training + customer support maintenance) - $2,856.00
○ Mindray BeneHeart C2 - Semi or Fully Auto - Value Added Package (Unit inc. Carry case + Delivery + AED training + customer support maintenance + Alarmed wall mounted Cabinet + AED 3D Signage) - $3,224.00

The Royal Life Saving Society - NSW Branch Packages

Please select your package *
○ Mindray BeneHeart C2 AED - $2,450
○ Mindray BeneHeart C2 AED with wall bracket or soft carry bag - $2,600
○ Mindray BeneHeart C2 AED with wall mount alarmed cabinet - $2,900

Wollongong First Aid Packages

Please select your package *
○ Mindray BeneHeart C2 AED Semi-Automatic or Automatic inc Soft Carry Bag - $2,250.00
○ Mindray BeneHeart C2 AED Semi-Automatic or Automatic with Wall Bracket - $2,277.83
○ Mindray BeneHeart C2 AED Semi-Automatic or Automatic with Standard Cabinet - $2,300.40
○ -Mindray BeneHeart C2 AED Semi-Automatic or Automatic with Alarmed Cabinet - $2,325.60
○ Mindray BeneHeart C2 AED Semi-Automatic or Automatic with Coded Cabinet - $2,580.75
○ Mindray BeneHeart C2 AED Semi-Automatic or Automatic with ABS Cabinet - $2,523.00
○ Mindray BeneHeart C2 AED Semi-Automatic or Automatic with Tough Case - $2,413.00

Defibtech Lifeline VIEW Semi Auto Suppliers

Please select supplier *
○ Australian Red Cross Society

Australian Red Cross Society Packages

Please select your package *
○ Defibtech Lifeline View Semi Auto Unit Only (Unit inc. Carry case + Delivery) - $3,268.00
○ Defibtech Lifeline View Semi Auto - Basic Package (Unit inc. Carry case + Delivery + AED training + customer support maintenance) - $3,898.00
○ Defibtech Lifeline View Semi Auto - Value Added Package (Unit inc. Carry case + Delivery + AED training + customer support maintenance + Alarmed wall mounted Cabinet + AED 3D Signage) - $4,185.00

Zoll AED Plus Semi-Auto and Fully Auto Suppliers

Please select supplier *
- ○ AED Authority
- ○ Australian Defibrillators Pty Ltd
- ○ Australian Red Cross Society
- ○ Defibrillators Australia
- ○ Defibshop
- ○ First Aid Accident and Emergency
- ○ Integrity Health & Safety Pty Ltd
- ○ Response for Life
- ○ St John Ambulance
- ○ Wollongong First Aid

AED Authority Packages

Please select your package *
- ○ Zoll AED Plus Wall Bracket Package - Fully or Semi-Auto - $2,295
- ○ Zoll AED Plus Hard-Shell Carry Case Package (Fully or Semi-Automatic) - $2,395
- ○ Zoll AED Plus Indoor Alarmed Cabinet Package (Fully or Semi-Automatic) - $2,395
- ○ Zoll AED Plus Outdoor Alarmed Cabinet Package (Fully or Semi-Automatic) - $2,475
- ○ Zoll AED Plus Outdoor Aluminium Alarmed Cabinet Package (Fully or Semi-Automatic) - $2,525
- ○ Zoll AED Plus Outdoor Keypad Cabinet Package (Fully or Semi-Automatic) - $2,695

Australian Defibrillators Pty Ltd Packages

Please select your package *
- ○ Zoll AED Plus - $2,275
- ○ Zoll AED Plus + Wall Bracket - $2,375
- ○ Zoll AED Plus + Outdoor Open Access Alarmed Cabinet - $2,675

Australian Red Cross Society Packages

Please select your package *
- ○ Zoll AED Plus Semi-Auto and Fully Auto Unit Only (Unit inc. Carry case + Delivery) - $2,765.00
- ○ Zoll AED Plus Semi-Auto and Fully Auto - Basic Package (Unit inc. Carry case + Delivery + AED training + customer support maintenance) - $3,365.00
- ○ Zoll AED Plus Semi-Auto and Fully Auto - Value Added Package (Unit inc. Carry case + Delivery + AED training + customer support maintenance + Alarmed wall mounted Cabinet + AED 3D Signage) - $3,765.00

Defibrillators Australia Packages

Please select your package *
- ○ Zoll AED PLUS - Premium Indoor/ Outdoor Cabinet or Wall Mount - $2,499
- ○ Zoll AED PLUS - Outdoor Keypad Cabinet - $2,499

Defibshop Packages

Please select your package *
- ○ Zoll AED Plus – Sports Bundle 1 - $2,795
- ○ Zoll AED Plus - Sports Bundle 2 - $2,895
- ○ Zoll AED Plus – Sport Bundle 3 - $3,195
- ○ Zoll AED Plus – Sport Bundle 4 - $2,795
- ○ Zoll AED Plus – Sport Bundle 5 - $2,895
- ○ Zoll AED Plus – Sport Bundle 6 - $3,195

First Aid Accident and Emergency Packages

Please select your package *
- ○ Zoll AED Plus Fully Auto Indoor Alarmed Wall Cabinet Bundle - $2,599
- ○ Zoll AED Plus Fully Auto Mobile Bundle - $2,599
- ○ Zoll AED Plus Fully Auto Outdoor Alarmed Wall Cabinet Bundle - $2,849
- ○ Zoll AED Plus Fully Auto Lockable Outdoor Alarmed Wall Cabinet Bundle - $2,999

Integrity Health & Safety Pty Ltd Packages

Please select your package *
- ○ Zoll AED Plus Semi- Auto or Fully Auto - Unit Only - $2,195
- ○ Zoll AED Plus Semi- Auto or Fully Auto - Indoor Cabinet Package - $2,295
- ○ Zoll AED Plus Semi- Auto or Fully Auto - Outdoor Cabinet Package - $2,245

Response for Life Packages

Please select your package *
- ○ Zoll AED Plus Bundle + Bracket - $2,700
- ○ Zoll AED Plus Bundle + Cabinet - $2,900
- ○ Zoll AED Plus Bundle + Outdoor Cabinet - $3,000

St John Ambulance Package

Please select your package *
- ○ Zoll AED PLUS CABINET BUNDLE - $2,950

Wollongong First Aid Packages

Please select your package *
- ○ Zoll AED Plus Semi-Automatic or Automatic with Soft Carry Case - $2,395.00
- ○ Zoll AED Plus Semi-Automatic or Automatic with Wall Backet - $2,422.83
- ○ Zoll AED Plus Semi-Automatic or Automatic with Standard Cabinet - $2,445.40
- ○ Zoll AED Plus Semi-Automatic or Automatic with Alarmed Cabinet - $2,645.00
- ○ Zoll AED Plus Semi-Automatic or Automatic with Coded Cabinet - $2,645.00
- ○ Zoll AED Plus Semi-Automatic or Automatic with ABS Cabinet - $2,770.90
- ○ Zoll AED Plus Semi-Automatic or Automatic with Tough Case - $2,374.00

Zoll AED 3 Semi-Auto and Fully Auto Suppliers

Please select supplier *
- ○ AED Authority
- ○ Australian Red Cross Society
- ○ Defibrillators Australia
- ○ Defibshop
- ○ Integrity Health and Safety
- ○ Response for Life
- ○ St John Ambulance
- ○ Wollongong First Aid

AED Authority Packages

Please select your package *
- ○ Zoll AED 3 Wall Bracket Package (Fully or Semi-Automatic) - $2,995.00
- ○ Zoll AED 3 Hard-Shell Carry Case Package (Fully or Semi-Automatic) - $3,095.00
- ○ Zoll AED 3 Indoor Alarmed Cabinet Package (Fully or Semi-Automatic) - $3,095.00
- ○ Zoll AED 3 Outdoor Alarmed Cabinet Package (Fully or Semi-Automatic) - $3,175.00
- ○ Zoll AED 3 Outdoor Aluminium Alarmed Cabinet Package (Fully or Semi-Automatic) - $3,225.00
- ○ Zoll AED 3 Outdoor Alarmed Keypad Cabinet Package (Fully or Semi-Automatic) - $3,395.00

Australian Red Cross Society Packages

Please select your package *
- ○ Zoll AED 3 Semi-Auto and Fully Auto Unit Only (Unit inc. Carry case + Delivery) - $3,477.00
- ○ Zoll AED 3 Semi-Auto and Fully Auto - Basic Package (Unit inc. Carry case + Delivery + AED training + customer support maintenance) - $4,077.00
- ○ Zoll AED 3 Semi-Auto and Fully Auto - Value Added Package (Unit inc. Carry case + Delivery + AED training + customer support maintenance + Alarmed wall mounted Cabinet + AED 3D Signage) - $4,475.00

Defibrillators Australia Packages

Please select your package *
- ○ Zoll AED 3 - Premium Indoor/ Outdoor Cabinet or Wall Mount - $2,999
- ○ Zoll AED 3 - Outdoor Keypad Cabinet - $2,999

Defibshop Packages

Please select your package *
- ○ Zoll AED 3 - Sports Bundle 10 - $3,195
- ○ Zoll AED 3 - Sports Bundle 11 - $3,295
- ○ Zoll AED 3 - Sports Bundle 12 - $3,595
- ○ Zoll AED 3 - Sports Bundle 13 - $3,195
- ○ Zoll AED 3 - Sports Bundle 14 - $3,295
- ○ Zoll AED 3 - Sports Bundle 15 - $3,595

Integrity Health and Safety Packages

Please select your package *
- ○ Zoll AED 3 Semi-Auto and Fully Auto – Unit Only - $2,895
- ○ Zoll AED 3 Semi-Auto and Fully Auto – Indoor Cabinet Package - $2,995
- ○ Zoll AED 3 Semi-Auto and Fully Auto – Bracket Package - $2,945

Response for Life Packages

Please select your package *
- ○ Zoll AED 3 Defib Package + Bracket - $3,350
- ○ Zoll AED 3 Defib Package + Cabinet - $3,550
- ○ Zoll AED 3 Defib Package + Outdoor Cabinet - $3,750

St John Ambulance Packages

Please select your package *
- ○ Zoll AED 3 CABINET BUNDLE - $3,495

Wollongong First Aid Packages

Please select your package *
- ○ Zoll AED 3 Semi-Automatic or Automatic with Soft Carry Case - $3,050.00
- ○ Zoll AED 3 Semi-Automatic or Automatic with Wall Backet - $3,151.00
- ○ Zoll AED 3 Semi-Automatic or Automatic with Standard Cabinet - $3,371.00
- ○ Zoll AED 3 Semi-Automatic or Automatic with Coded Cabinet - $3,380.75
- ○ Zoll AED 3 Semi-Automatic or Automatic with Tough Case - $3,460.00

LIFEPAK CR2 Semi and Fully Auto Packages Suppliers

Please select supplier *
- ○ AED Authority
- ○ Defibrillators Australia
- ○ First Aid Accident & Emergency
- ○ Integrity Health & Safety Pty Ltd
- ○ Response for Life
- ○ St John Ambulance
- ○ Wollongong First Aid

AED Authority Packages

Please select your package *
- ○ Lifepak CR2 Essential Wall Bracket Package (Fully Automatic) - $1,995.00
- ○ Lifepak CR2 Essential Hard-Shell Carry Case Package (Fully Automatic) - $2,095.00
- ○ Lifepak CR2 Essential Indoor Alarmed Cabinet Package (Fully Automatic) - $2,095.00
- ○ Lifepak CR2 Essential Outdoor Alarmed Cabinet Package (Fully Automatic) - $2,175.00
- ○ Lifepak CR2 Essential Outdoor Aluminium Alarmed Cabinet Package (Fully Automatic) - $2,225.00
- ○ Lifepak CR2 Essential Outdoor Alarmed Keypad Cabinet Package (Fully Automatic) - $2,395.00
- ○ Lifepak CR2 Wi-Fi Wall Bracket Package (Fully or Semi-Automatic) - $2,795.00
- ○ Lifepak CR2 Wi-Fi Hard-Shell Carry Case Package (Fully or Semi-Automatic) - $2,895.00
- ○ Lifepak CR2 Wi-Fi Indoor Alarmed Cabinet Package (Fully or Semi-Automatic) - $2,895.00

○ Lifepak CR2 Wi-Fi Outdoor Alarmed Cabinet Package (Fully or Semi-Automatic) - $2,975.00
○ Lifepak CR2 Wi-Fi Outdoor Aluminium Alarmed Cabinet Package (Fully or Semi-Automatic) - $3,025.00
○ Lifepak CR2 Wi-Fi Outdoor Alarmed Keypad Cabinet Package (Fully or Semi-Automatic) - $3,195.00
○ Lifepak CR2 4G Cellular Wall Bracket Package (Fully or Semi-Automatic) - $2,895.00
○ Lifepak CR2 4G Cellular Hard-Shell Carry Case Package (Fully or Semi-Automatic) - $2,995.00
○ Lifepak CR2 4G Cellular Indoor Alarmed Cabinet Package (Fully or Semi-Automatic) - $2,995.00
○ Lifepak CR2 4G Cellular Outdoor Alarmed Cabinet Package (Fully or Semi-Automatic) - $3,075.00
○ Lifepak CR2 4G Cellular Outdoor Aluminium Alarmed Cabinet Package (Fully or Semi-Automatic) - $3,125.00
○ Lifepak CR2 4G Cellular Outdoor Alarmed Keypad Cabinet Package (Fully or Semi-Automatic) - $3,295.00

Defibrillators Australia Packages

Please select your package *
○ LifePak CR2 Essential Package - Indoor/ Outdoor Cabinet or Wall Mount - $2,699
○ LifePak CR2 Essential – Outdoor Keypad Cabinet - $2,999
○ LifePak CR2 4G Cellular – Premium Indoor/ Outdoor Cabinet or Wall Mount - $2,999

First Aid Accident Emergency Packages

Please select your package *
○ LifePak CR2 Essential Semi or Auto with Adult & Child mode Indoor Alarmed Wall Cabinet Bundle - $2,799
○ LifePak CR2 Essential Semi or Auto with Adult & Child mode Mobile Bundle - $2,799
○ LifePak CR2 Essential Semi or Auto with Adult & Child mode Outdoor Alarmed Wall Cabinet Bundle - $2,899
○ LifePak CR2 Essential Semi or Auto with Adult & Child mode Lockable Outdoor Alarmed Wall Cabinet Bundle - $3,049

Integrity Health & Safety Pty Ltd Packages

Please select your package *
○ LifePak CR2 Essential (No WiFi) Semi-Auto or Fully Auto - Unit Only - $2,295
○ LifePakCR2 Essential (No WiFi) Semi-Auto or Fully Auto - Indoor Cabinet Package - $2,580
○ LifePak CR2 Essential (No WiFi) Semi-Auto or Fully Auto - Bracket Package - $2,480

Response For Life Packages

Please select your package *
○ LifePak CR2 Essential Defib Package + Bracket - $2,800
○ LifePak CR2 Essential Defib Package + Cabinet - $2,900
○ LifePak CR2 Essential Defib Package + Outdoor Cabinet - $3,100

St John Ambulance Packages

Please select your package *
○ LIFEPAK CR2 WIFI FULLY AUTOMATIC AED BUNDLE - $3,495

Wollongong First Aid Packages

Please select your package *
○ LifePak CR2 Essential Semi-Automatic or Automatic - $2,974.00
○ LifePak CR2 Essential Semi-Automatic or Automatic with Wall Bracket - $2,811.83
○ LifePak CR2 Essential Semi-Automatic or Automatic with Standard Cabinet - $2,834.40
○ LifePak CR2 Essential Semi-Automatic or Automatic with Alarmed Cabinet - $2,859.60
○ LifePak CR2 Essential Semi-Automatic or Automatic with Coded Cabinet - $3,114.75
○ LifePak CR2 Essential Semi-Automatic or Automatic with ABS Cabinet - $3,057.00
○ LifePak CR2 Essential Semi-Automatic or Automatic with Tough Case - $2,947.00
○ LifePak CR2 Essential Semi-Automatic or Automatic with Extreme Kit- $3,223.00
○ LifePak CR2 cprINSIGHT Semi-Automatic or Automatic (WiFi) - $3,484.00
○ LifePak CR2 cprINSIGHT Semi-Automatic or Automatic (WiFi) with Wall Bracket - $3,511.83
○ LifePak CR2 cprINSIGHT Semi-Automatic or Automatic (WiFi) with Standard Cabinet - $3,534.40
○ LifePak CR2 cprINSIGHT Semi-Automatic or Automatic (WiFi) with Alarmed Cabinet - $3,559.60
○ LifePak CR2 cprINSIGHT Semi-Automatic or Automatic (WiFi) with Coded Cabinet - $3,814.75
○ LifePak CR2 cprINSIGHT Semi-Automatic or Automatic (WiFi) with ABS Cabinet - $3,757.00
○ LifePak CR2 cprINSIGHT Semi-Automatic or Automatic (WiFi) with Tough Case - $3,647.00
○ LifePak CR2 cprINSIGHT Semi-Automatic or Automatic (WiFi) with Extreme Kit - $3,926.90
○ LifePak CR2 cprINSIGHT Automatic (4G) - $3,595.00
○ LifePak CR2 cprINSIGHT Automatic (4G) with Wall Bracket - $3,622.83
○ LifePak CR2 cprINSIGHT Automatic (4G) with Standard Cabinet - $3,645.40
○ LifePak CR2 cprINSIGHT Automatic (4G) with Alarmed Cabinet - $3,670.60
○ LifePak CR2 cprINSIGHT Automatic (4G) with Coded Cabinet - $3,925.75
○ LifePak CR2 cprINSIGHT Automatic (4G) with ABS Cabinet - $3,758.00
○ LifePak CR2 cprINSIGHT Automatic (4G) with Tough Case- $3,758.00
○ LifePak CR2 cprINSIGHT Automatic (4G) with Extreme Kit - $4,034.90

Philips FRx Suppliers

Please select supplier *
○ AED Authority
○ Defibshop
○ The Royal Life Saving Society Australia – NSW Branch

AED Authority Packages

Please select your package *
○ Philips FRx Wall Bracket Package (Semi-Automatic) - $2,395.00
○ Philips FRx Hard-Shell Carry Case Package (Semi-Automatic) - $2,495.00
○ Philips FRx Indoor Alarmed Cabinet Package (Semi-Automatic) - $2,495.00

- ○ Philips FRx Outdoor Alarmed Cabinet Package (Semi-Automatic) - $2,575.00
- ○ Philips FRx Outdoor Aluminium Alarmed Cabinet Package (Semi-Automatic) - $2,625.00
- ○ Philips FRx Outdoor Alarmed Keypad Cabinet Package (Semi-Automatic) - $2,795.00

Defibshop Packages

Please select your package *
- ○ Philips Heartstart FRx - Sports Bundle 16 - $2,795
- ○ Philips Heartstart FRx - Sports Bundle 17 - $2,895
- ○ Philips Heartstart FRx - Sports Bundle 18 - $2,995

The Royal Life Saving Society - NSW Branch Packages

Please select your package *
- ○ Philips FRx AED semi automatic - $2,200
- ○ Philips FRx AED semi automatic with wall bracket - $2,260
- ○ Philips FRx AED semi automatic with wall mount alarmed cabinet - $2,500

Powerbeat Suppliers

Please select supplier *
- ○ St John Ambulance

St John Ambulance PowerBeat X3 Packages

Please select your package *
- ○ ST JOHN POWERBEAT X3 AED - $1,995
- ○ ST JOHN POWERBEAT X3 BUNDLE - $2,150
- ○ ST JOHN POWERBEAT X3 LIFETIME BUNDLE - $2,465

G5 Suppliers

Please select supplier *
- ○ St John Ambulance

St John Ambulance Packages

Please select your package *
- ○ ST JOHN G5 WITH ICPR - $2,450
- ○ ST JOHN G5 WITH ICPR BUNDLE - $2,650
- ○ ST JOHN G5 WITH ICPR - LIFETIME BUNDLE - $3,895

Philips HS1 Suppliers

Please select supplier *
- ○ AED Authority
- ○ Defibshop
- ○ Defibrillators Australia

AED Authority Packages

Please select your package *
- ○ Philips HS1 Wall Bracket Package (Semi-Automatic) - $1,895.00
- ○ Philips HS1 Hard-Shell Carry Case Package (Semi-Automatic) - $1,995.00
- ○ Philips HS1 Indoor Alarmed Cabinet Package (Semi-Automatic) - $1,995.00
- ○ Philips HS1 Outdoor Alarmed Cabinet Package (Semi-Automatic) - $2,075.00
- ○ Philips HS1 Outdoor Aluminium Alarmed Cabinet Package (Semi-Automatic) - $2,125.00
- ○ Philips HS1 Outdoor Alarmed Keypad Cabinet Package (Semi-Automatic) - $2,295.00

Defibshop Packages

Please select your package *
- ○ Philips Heartstart HS1 - Sport Bundle 7 - $2,550
- ○ Philips Heartstart HS1 - Sport Bundle 8 - $2,650
- ○ Philips Heartstart HS1 - Sport Bundle 9 - $2,950

Defibrillators Australia Packages

Please select your package *
- ○ Philips HeartStart HS1 - Premium Indoor/Outdoor Cabinet, wall hook, backpack or wall mount - $1,999.00

Selected AED Package Price

Please enter the total price of your selected AED package *

Must be a dollar amount.

Total Amount Requested *

What is the total financial support you are requesting under this grant?

Where the package price of the selected AED exceeds $3,000, your organisation is required to fund any additional costs.

The minimum cash contribution required from applicant organisation *

$

This number/amount is calculated.

Applicant agrees to fund this amount *

- ○ Agree

Total Grant Amount Requested is outside the allowable limit

You have entered an amount greater than the allowable limits of $3,000, as per the Program Guidelines.

Please amend the Total Amount Requested or your application may be deemed ineligible for funding.

Totals and Budget Balancing

Total Cost of AED package

$

This number/amount is calculated.

Total Grant Amount Requested

$

This number/amount is calculated.

Total Cash Contributions (if required)

$

This number/amount is calculated.
If AED package price is less than $3,000 this number will be zero ($0).

Budget balancing - should be zero ($0)

$

This number/amount is calculated.
This is a calculation of the AED package price minus the Total Amount Requested and any required cash contributions.

Total Grant Amount Requested exceeds AED package price

You have requested a grant amount greater than the AED package price.

Please review and amend the Total Amount Requested and/or the AED package price.

AED package price exceeds Total Grant Amount Requested

You have entered an AED package price greater than the Total Amount Requested plus cash contributions.

Please review and amend the Total Amount Requested and/or the AED package price.

Project Data

* indicates a required field

The following information is being collected for statistical purposes but may also be considered as part of your application. Please be as accurate as possible.

Which gender group will the project primarily benefit? *

○ Female

- ○ Male
- ○ Self-Described
- ○ All Genders

Which identified age group will the project primarily benefit? *
- ○ Preschool
- ○ School Aged Children (5-12 years)
- ○ Young People (12-24 years)
- ○ Adult
- ○ Seniors (60+ years)
- ○ All Age Groups

What is the primary community (if any) that your project demonstrates benefit to? *
- ○ Disadvantaged communities (low SEIFA)
- ○ People from culturally and linguistically diverse (CALD) backgrounds
- ○ First Nations/Aboriginal people
- ○ People with a disability
- ○ Regional and remote
- ○ Women and girls
- ○ LGBTQIA+
- ○ None of the above

Does your project demonstrate benefit to any other communities? *
- ☐ Disadvantaged communities (low SEIFA)
- ☐ People from culturally and linguistically diverse (CALD) backgrounds
- ☐ First Nations/Aboriginal people
- ☐ People with a disability
- ☐ Regional and remote
- ☐ Women and girls
- ☐ LGBTQIA+
- ☐ None of the above

Which of the following represents your highest competition training level? *
- ○ Neighbourhood
- ○ Local
- ○ Regional
- ○ State
- ○ National/International
- ○ High Performance
- ○ Centres of Excellence

Primary Project Beneficiaries

Please select your primary sport beneficiary: *
- ○ Adventure Camping
- ○ Aeromodelling
- ○ Archery / Archery Field
- ○ Athletics
- ○ Australian Football League
- ○ Badminton
- ○ Balloon Soccer (Powerchair Sport)
- ○ Ballooning
- ○ Little Athletics
- ○ Masters swimming
- ○ Mixed Martial Arts
- ○ Modern Pentathlon
- ○ Motorcycling
- ○ Motorsport
- ○ Mountain Biking
- ○ Netball

- ○ Ballroom Dancing
- ○ Baseball
- ○ Basketball
- ○ Basketball (Deaf Sport)
- ○ Basketball (Wheelchair Sport)
- ○ Biathlon
- ○ Billiards
- ○ Blind Cricket (Blind / Vision Impaired Sport)
- ○ Blindsport NSW
- ○ BMX – Freestyle / Racing
- ○ Bobsleigh
- ○ Bocce
- ○ Boccia
- ○ Bowls
- ○ Boxing
- ○ Calisthenics
- ○ Campdraft
- ○ Canoeing
- ○ Carriage Riding
- ○ Cerebral Palsy Sport and Recreation Association of NSW
- ○ Cheerleading
- ○ Clay Target Shooting
- ○ Climbing / Rock Climbing
- ○ Council
- ○ Cricket
- ○ Cricket (Deaf Sport)
- ○ Croquet
- ○ Curling
- ○ Cycling Track
- ○ Dancesports
- ○ Darts
- ○ Deafsports Australia
- ○ Disabled Winter Sports
- ○ Diving
- ○ Dodgeball
- ○ Dragon Boating
- ○ Education/Schools
- ○ Eight Ball
- ○ Endurance Riders
- ○ Equestrian
- ○ Fencing
- ○ Floorball
- ○ Flying Disc / Ultimate Frisbee
- ○ Football
- ○ Football / Futsal (Blind / Vision Impaired Sport)
- ○ Football / Futsal
- ○ Football / Futsal (Deaf Sport)
- ○ Football (Powerchair Sport)
- ○ Gaelic Football
- ○ Gliding
- ○ Goal Ball (Blind / Vision Impaired Sport)
- ○ Golf
- ○ Netball (Deaf Sport)
- ○ Non-Sport – Recreational Dancing
- ○ NSW Institute of Sport
- ○ Orienteering
- ○ Outrigger
- ○ Oztag Football
- ○ Paddle Sports
- ○ Para - cycling
- ○ Parachute
- ○ Paragliding
- ○ PCYC
- ○ Pistol
- ○ Polo
- ○ Polocrosse
- ○ Pony Club
- ○ Powerlifting
- ○ Racquetball
- ○ Racquetball (Deaf Sport)
- ○ Recreational Running
- ○ Regional Academies of Sport
- ○ Riding for the disabled
- ○ Rifle
- ○ Road Racing
- ○ Road Cycling
- ○ Rodeo
- ○ Roller Blading
- ○ Roller Derby
- ○ Roller Skating
- ○ Rowing
- ○ Royal Life Saving
- ○ Rugby (Powerchair Sport)
- ○ Rugby League
- ○ Rugby League (Wheelchair Sports)
- ○ Rugby Union
- ○ Sailing
- ○ Sailing (disability)
- ○ Show Jumping
- ○ Skateboarding
- ○ Skeleton
- ○ Skiing
- ○ Snooker
- ○ Snooker (Deaf Sport)
- ○ Snowboarding
- ○ Social and Community Groups
- ○ Softball
- ○ Speedway
- ○ Squash
- ○ Surf Life Saving
- ○ Surfing
- ○ Swimming
- ○ Synchronised Swimming
- ○ Table Tennis

- ○ Golf (Amputee)
- ○ Golf (Blind / Vision Impaired Sport)
- ○ Gridiron
- ○ Gymnastics
- ○ Handball
- ○ Hang Gliding
- ○ Hockey
- ○ Hockey (Powerchair Sport)
- ○ Hockey (Wheelchair Sports)
- ○ Ice Hockey
- ○ Ice Racing
- ○ Ice Skating
- ○ Ice Speed Skating
- ○ Indoor Bowls
- ○ Judo
- ○ Judo (Deaf Sport)
- ○ Jujitsu
- ○ Karate
- ○ Karting
- ○ Kayaking
- ○ Kendo (Iaido/Jodo)
- ○ Kickboxing
- ○ Korfball
- ○ Kung Fu
- ○ Lacrosse
- ○ Lawn Bowls
- ○ Lawn Bowls (Blind / Vision Impaired Sport)
- ○ Table Tennis (Deaf Sport)
- ○ Taekwondo
- ○ Tai Chi
- ○ Tennis
- ○ Tennis (Blind / Vision Impaired Sport)
- ○ Tennis (Wheelchair Sports)
- ○ Tenpin Bowling
- ○ Touch Football
- ○ Track and Road Cycling (Wheelchair Sports)
- ○ Trail walking/running/riding
- ○ Transplant Sports
- ○ Triathlon
- ○ Underwater Sports
- ○ University Sports
- ○ Volleyball
- ○ Wakeboarding
- ○ Water Aerobics
- ○ Water Polo
- ○ Water Skiing
- ○ Weightlifting
- ○ Wheelchair Dancing
- ○ Wheelchair Sport NSW
- ○ Wrestling
- ○ Yachting
- ○ YMCA/ YWCA
- ○ Other:

Does the project have any other beneficiaries? *

- ○ Yes
- ○ No

Secondary Project Beneficiaries

Please select all that apply: *

- ☐ Adventure Camping
- ☐ Aeromodelling
- ☐ Archery / Archery Field
- ☐ Athletics
- ☐ Australian Football League
- ☐ Badminton
- ☐ Balloon Soccer (Powerchair Sport)
- ☐ Ballooning
- ☐ Ballroom Dancing
- ☐ Baseball
- ☐ Basketball
- ☐ Basketball (Deaf Sport)
- ☐ Basketball (Wheelchair Sport)
- ☐ Biathlon
- ☐ Billiards
- ☐ Blind Cricket (Blind / Vision Impaired Sport)
- ☐ Blindsport NSW
- ☐ Lawn Bowls (Blind / Vision Impaired Sport)
- ☐ Little Athletics
- ☐ Masters swimming
- ☐ Mixed Martial Arts
- ☐ Modern Pentathlon
- ☐ Motorcycling
- ☐ Motorsport
- ☐ Mountain Biking
- ☐ Netball
- ☐ Netball (Deaf Sport)
- ☐ Non-Sport – Recreational Dancing
- ☐ NSW Institute of Sport
- ☐ Orienteering
- ☐ Outrigger
- ☐ Oztag Football
- ☐ Paddle Sports
- ☐ Para - cycling

- ☐ BMX – Freestyle / Racing
- ☐ Bobsleigh
- ☐ Bocce
- ☐ Boccia
- ☐ Bowls
- ☐ Boxing
- ☐ Calisthenics
- ☐ Campdraft
- ☐ Canoeing
- ☐ Carriage Riding
- ☐ Cerebral Palsy Sport and Recreation Association of NSW
- ☐ Cheerleading
- ☐ Clay Target Shooting
- ☐ Climbing / Rock Climbing
- ☐ Council
- ☐ Cricket
- ☐ Cricket (Deaf Sport)
- ☐ Croquet
- ☐ Cross Country Running
- ☐ Curling
- ☐ Cycling Track
- ☐ Dancesports
- ☐ Darts
- ☐ Deafsports Australia
- ☐ Disabled Winter Sports
- ☐ Diving
- ☐ Dodgeball
- ☐ Dragon Boating
- ☐ Education/Schools
- ☐ Eight Ball
- ☐ Endurance Riders
- ☐ Equestrian
- ☐ Fencing
- ☐ Floorball
- ☐ Flying Disc / Ultimate Frisbee
- ☐ Football
- ☐ Football / Futsal (Blind / Vision Impaired Sport)
- ☐ Football / Futsal
- ☐ Football / Futsal (Deaf Sport)
- ☐ Football (Powerchair Sport)
- ☐ Gaelic Football
- ☐ Gliding
- ☐ Goal Ball (Blind / Vision Impaired Sport)
- ☐ Golf
- ☐ Golf (Amputee)
- ☐ Golf (Blind / Vision Impaired Sport)
- ☐ Gridiron
- ☐ Gymnastics
- ☐ Handball
- ☐ Hang Gliding
- ☐ Hockey
- ☐ Hockey (Powerchair Sport)
- ☐ Parachute
- ☐ Paragliding
- ☐ PCYC
- ☐ Pistol
- ☐ Polo
- ☐ Polocrosse
- ☐ Pony Club
- ☐ Powerlifting
- ☐ Racquetball
- ☐ Racquetball (Deaf Sport)
- ☐ Recreational Running
- ☐ Regional Academies of Sport
- ☐ Riding for the disabled
- ☐ Rifle
- ☐ Road Racing
- ☐ Road Cycling
- ☐ Rodeo
- ☐ Roller Blading
- ☐ Roller Derby
- ☐ Roller Skating
- ☐ Rowing
- ☐ Royal Life Saving
- ☐ Rugby (Powerchair Sport)
- ☐ Rugby League
- ☐ Rugby League (Wheelchair Sports)
- ☐ Rugby Union
- ☐ Sailing
- ☐ Sailing (disability)
- ☐ Show Jumping
- ☐ Skateboarding
- ☐ Skeleton
- ☐ Skiing
- ☐ Snooker
- ☐ Snooker (Deaf Sport)
- ☐ Snowboarding
- ☐ Social and Community Groups
- ☐ Softball
- ☐ Speedway
- ☐ Squash
- ☐ Surf Life Saving
- ☐ Surfing
- ☐ Swimming
- ☐ Synchronised Swimming
- ☐ Table Tennis
- ☐ Table Tennis (Deaf Sport)
- ☐ Taekwondo
- ☐ Tai Chi
- ☐ Tennis
- ☐ Tennis (Blind / Vision Impaired Sport)
- ☐ Tennis (Wheelchair Sports)
- ☐ Tenpin Bowling
- ☐ Touch Football

☐ Hockey (Wheelchair Sports)
☐ Ice Hockey
☐ Ice Racing
☐ Ice Skating
☐ Ice Speed Skating
☐ Indoor Bowls
☐ Judo
☐ Judo (Deaf Sport)
☐ Jujitsu
☐ Karate
☐ Karting
☐ Kayaking
☐ Kendo (Iaido/Jodo)
☐ Kickboxing
☐ Korfball
☐ Kung Fu
☐ Lacrosse
☐ Lawn Bowls
☐ Track and Road Cycling (Wheelchair Sports)
☐ Trail walking/running/riding
☐ Transplant Sports
☐ Triathlon
☐ Underwater Sports
☐ University Sports
☐ Volleyball
☐ Wakeboarding
☐ Water Aerobics
☐ Water Polo
☐ Water Skiing
☐ Weightlifting
☐ Wheelchair Dancing
☐ Wheelchair Sport NSW
☐ Wrestling
☐ Yachting
☐ YMCA/ YWCA
☐ Other:

Declaration and Authorisation

* indicates a required field

Declaration

The Applicant represents and warrants that this application has been submitted by an authorised representative of the Applicant (e.g. CEO, Chief Financial Officer, General Manager, Director, Chair of the Board, President, authorised manager etc).

Where this Application is submitted in the course of employment by a representative of any kind (e.g. authorised representative or agent) of the Applicant, you: (i) acknowledge and agree that the Applicant is deemed to be jointly and separately bound by this application; and (ii) represent and warrant that you have the authority to represent and bind the Applicant as contemplated by this provision.

By submitting this application form I hereby declare that:

- I have read and understood each of the acknowledgements, agreements, representations and warranties provided above, and that each of these are true and correct;
- All information provided including the responses to each question in the relevant sections of this application is true and correct to the best of my knowledge;
- Any information contained in this application may be disclosed to other Government agencies, staff administering the program, and to external stakeholders (including consultants, lawyers and other advisers) as part of the assessment of this application;
- I am authorised to submit this application on behalf of, and have the authority to represent and bind the Applicant;
- I understand that any false declaration may render this application ineligible/invalid; and
- All relevant conflicts of interest have been declared

Authorisation

I agree *

☐ Yes

Name of authorised person *

Title | First Name | Last Name

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

Position *

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

Phone number *

Must be an Australian phone number.
We may contact you to verify that this application is authorised by the applicant organisation

Email *

Must be an email address.

Declaration by person submitting this form

The declaration below must be agreed to by a person who is submitting this form on behalf of the organisation.

I declare that: *

☐ I am duly authorised by the organisation to prepare and submit this application.
☐ This organisation is eligible to apply for funding in accordance with the eligibility criteria in the Funding Guidelines.
☐ The responses in this application and all supporting documents provided are to the best of my knowledge true and correct.
☐ I understand that the Office of Sport may disclose the information provided in this application to other Government agencies, Local Government, reviewers and staff assisting with the administration or promotion of State Government Grant Schemes and/or in the event of a request pursuant to the Government Information (Public Access) Act 2009.
☐ I understand that information in relation to this project will be made public in the event that the application for funding is successful and in other circumstances as outlined in the Program Guidelines.
☐ Where required, our project will comply with all the relevant codes, standards and applicable legislation of the Australian and NSW Governments.
☐ I acknowledge that in preparing this application I am not aware of any known conflicts of interest as outlined in the Program Guidelines, and will keep the Office of Sport updated if any conflict of interest arise during the term of the funding agreement.
☐ I understand that if the project is successful, the organisation is required to have a minimum Public Liability Insurance cover of $5 million for the duration of the project.
☐ The applicant organsation is not named by the National Redress Scheme for Institutional Child Sexual Abuse on its list of Institutions that have not joined or signified their intent to join the Scheme.

At least 9 choices must be selected.

Person submitting this form *
Title | First Name | Last Name

Position *

Phone Number *
Must be an Australian phone number.

Email *
Must be an email address.

Date *
Must be a date.

Child Safe Reporting Obligations

The Office of Sport is required to collect the following information as part of our child safe reporting obligations. Answering these questions will not have any impact on the eligibility/ merit of your application.

Is your organisation aware of the NSW Child Safe Scheme? *
○ Yes ○ No ○ Unsure ○ Not Applicable

Is your organisation working to embed the 10 Child Safe Standards in it's systems, policies and processes? *
○ Yes ○ No

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the SUBMIT button please take a few moments to provide some feedback.

The objectives of the grant program were clearly communicated *
○ Strongly disagree ○ Disagree ○ Agree ○ Strongly agree

The range of eligible organisations aligned well with and supported the program's objectives *
○ Strongly disagree ○ Disagree ○ Agree ○ Strongly agree

The scope of eligible projects was appropriate considering the program's objectives *
○ Strongly disagree ○ Disagree ○ Agree ○ Strongly agree

I understood the requirements of the grant based on the information within the program guidelines *
○ Strongly disagree ○ Disagree ○ Agree ○ Strongly agree

The application process was easy to navigate *
○ Strongly disagree ○ Disagree ○ Agree ○ Strongly agree

The application form was easy to complete *
○ Strongly disagree ○ Disagree ○ Agree ○ Strongly agree

I received sufficient support from Office of Sport throughout the application process *
○ Strongly disagree ○ Disagree ○ Agree ○ Strongly agree

I had sufficient time to prepare and submit my application *
○ Strongly disagree ○ Disagree ○ Agree ○ Strongly agree

The application form allowed me to easily communicate my project objectives *
○ Strongly disagree ○ Disagree ○ Agree ○ Strongly agree

Which of the following best describes the project in your grant application? *
○ We had a pre-planned project that the funding will help us deliver
○ We designed a new project specifically to align with the grant requirements
○ We adapted an existing project to take advantage of the funding opportunity

How did you find out about this grant funding opportunity? *
○ Office of Sport newsletter
○ Social Media (e.g., Facebook, Linkedin, Instagram etc.)
○ Member of Parliament
○ State Sporting Organisation
○ Sport club
○ Word of mouth
○ Other:

Would you like to receive information in future from the Office of Sport by electronic direct mail (EDM) about future or repeat programs or other resources available from the Office of Sport that may be of interest to your organisation? *
○ Yes ○ No

If yes, please add your Email Address to receive information by EDM from the Office of Sport

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