

Macquarie Credit Union Partnership Application

Applicant's
Full Name: _____
Phone Number: _____
Address: _____
City: _____ **State:** _____ **Postcode:** _____
Email Address: _____

On behalf of
Organisation Name: _____
Phone Number: _____
Address: _____
City: _____ **State:** _____ **Postcode:** _____
Email Address: _____
ABN (If registered): _____

Nature of Request: ☐ **Sponsorship Request** ☐ **Donation** ☐ **Other e.g Volunteers**

Investment Requested: \$ _____ **Including GST** (if registered)

*If proposed investment is tiered (e.g. Gold, Silver, Bronze) please submit all tier descriptions and details as an attachment to this application.

Proposed duration of investment: _____

Event Name: _____
Date: _____
Location: _____
City: _____ **State:** _____ **Postcode:** _____

Partnership Questionnaire

Section 1

1a) Has your event/organisation been supported by us before? ☐ Yes or ☐ No

1b) If Yes, please outline how we supported your event/organisation.

Section 2

2a) Are you/your organisation/ or member(s) of your organisation a member of Macquarie Credit Union?

☐ Yes or ☐ No

2b) If yes, please specify.

2c) How or where did you hear about Macquarie Credit Union?

Section 3

3a) Are you/your organisation/ or member(s) of your organisation affiliated with an industry bond partner of Macquarie Credit Union? ☐ Yes or ☐ No

3b) If yes, please specify.

Section 4

4a) Are you closely affiliated with any Employees or Board Members of Macquarie Credit Union?

☐ Yes or ☐ No

4b) If yes, please specify.

Section 5

5a) Please select the event type/s most applicable to your proposal.

<input type="checkbox"/> Sport & Leisure	<input type="checkbox"/> Environment	<input type="checkbox"/> Education
<input type="checkbox"/> Arts & Cultural	<input type="checkbox"/> Medical	<input type="checkbox"/> Charity & Welfare
<input type="checkbox"/> Health and Wellbeing	<input type="checkbox"/> Other (Please explain)	

Section 6

6a) Please provide a brief description of the organisation, event, charity, group, club you propose Macquarie Credit Union Sponsor.

6b) What do you seek to achieve through your proposed partnership?

6c) Please advise how will our partnership funds will be utilised?

Section 7

7a) Please describe the benefits of the partnership proposal to our community.

(How will this partnership benefit our Members, and/ or the Dubbo Local Government Area and/ or a Bond Partner or Macquarie Credit Union).

Section 8

8a) Please describe the branding opportunities and benefits for Macquarie Credit Union?

(For example named sponsorship, logo rights, site allocation, signage, merchandise, website links, announcements, social media advertising, database marketing or ticket allocation etc.)

8b) Please detail what prior experience you / your organisation has in managing successful partnership activities and delivering measureable value to sponsors.

Section 9

9a) If you are having an event, how many people are expected to attend?

9b) Please also advise of past recorded attendance figures for a re-occurring event.

9c) Are you currently using any form of social media? If yes, please list relevant account/s and hashtag details:

9d) Will any media be used for promotion? If so, please specify details (provider, what, when).

9e) List any geographic and demographic targets that will you be marketing towards (i.e. location, gender, age, interests, income, occupation etc.)

Section 10

10a) Please describe any existing relationship (past or present) with any other financial, banking or credit union institution.

10b) Please list what sponsors are/ will be involved/ or approached (if applicable).

Section 11

11a) Can a Tax Invoice be provided? ☐ Yes or ☐ No

11b) Is your organisation / charity registered as not-for profit? ☐ Yes or ☐ No

11c) Does your organisation/ charity have current Public Liability Insurance Cover? ☐ Yes or ☐ No

11d) Do you have any contingency plans in case, for any unavoidable reason, you are unable to have the event? What are your contingency plans? Would you be prepared to return the Partnership funds?

Partnership Application Terms and Conditions

- 1) Confirmation of receipt of your application does not guarantee acceptance of partnership.
- 2) Macquarie Credit Union has sole discretion over approval and acceptance of the application and how any funds will be applied.
- 3) Macquarie Credit Union has sole discretion over the use of its logo and name at all times.
- 4) Macquarie Credit Union is under no obligation to give reason for non-acceptance of an application for partnership.
- 5) The Applicant warrants that by signing this application, that a genuine benefit (as described on the application) exists and that any assistance provided will be solely to address that benefit only.
- 6) The Applicant agrees to provide Macquarie Credit Union with all relevant receipts and documentation to support and verify an audit trail as required.
- 7) The application form must be completed in full without omission to the best of the applicant's knowledge and tendered to Macquarie Credit Union in good faith.

I accept the above Application Terms and Conditions.

Signature of Applicant: _____ **Date:** _____

Thank you for your Application.

Form updated 22 May 2023