

State Championships Players & Subsidy Application

Event Information

Sport: _____ Event Date: _____

Location/Venue: _____

Event Coordinator

Name: _____ Member No: _____

Address: _____

Phone Numbers: _____

Email: _____

Alternative Contact

Name: _____ Member No: _____

Address: _____

Phone Numbers: _____

Email: _____

Players

1. Attach a separate list of all players or a copy of the team lists. *Please include:*

Team Name	Member Number	First Name	Surname	Suburb
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2. Attach an indemnity form for all players

Subsidy Payment

Subsidy:

Event Subsidy from QRI Lifestyle minimum \$500 OR \$3.45 per participating QRI Lifestyle Member.

Pay to:

Sports State Body OR

QRI Lifestyle Branch hosting the event

Account Details for EFT payment

Account Name: _____

BSB: _____ Account Number: _____

Event Coordinator's Signature: _____ Date: _____

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Return form to:

Mail:

QRI Lifestyle
GPO Box 2098
Brisbane QLD 4001

In Person:

Shop 1, Central Railway Plaza
309 Edward Street
Brisbane

Fax:

07 3036 0800

State Office Use Only:

Sport _____

Event Subsidy

Paid for QRI Lifestyle members (not paid for social or spouse members or non members)

Number of QRI Members Playing in Event _____ x \$3.45 per member

= **Total Event Subsidy** \$ _____

QR Sponsorship

\$400 from QR (while sponsorship agreement is in place)

Total Subsidy to be Paid

Amount	\$ _____
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Date Paid: _____

Paid by: Cheque EFT

Paid to: _____

Merchandise

Detail any merchandise items approved as additional sponsorship, including the cost to be charged to QRI Sports Sponsorship budget.