



Activity Leader Program

APPLICATION FORM

Select the Active Albany publication that you will be delivering in:

Term 1

Term 2

Term 3

Term 4

Contact Details (Individual Activity Leaders to complete only)

Contact Name

Phone Number

Mobile

Email Address

Postal Address

Postcode

Contact Details (Organisations/Agencies to complete)

Organisation/Agency Name

ABN

Club Member/Staff Member

Names of club/staff members running the activity:

For all personnel please attach a separate summary of relevant experience in delivering and working with target audiences (maximum half page).

Primary Contact Name

Primary Contact Number

Mobile

Email Address

Postal Address

Postcode

Does your organisation/agency cover staff insurance:

Yes (Please provide copy of insurance letter)

No

This program is proudly supported by:



Proposed Activity/Program Details

Activity Name

Do you offer this group at any other venues **Yes** - where and when: **No**

How will you offer this Activity **Once Off** Date Range _____ Re-occurring over _____ weeks

Maximum Number Participants _____ **Minimum Number Participants** _____

Preferred Day/ start/ finish time Day _____ Start Time _____ End Time _____

Required Equipment from ALAC or City of Albany **Yes** - If yes, list what is required? **No**

Special equipment needed **Yes** - If yes, list what is required in the table below **No**

Item	Cost per Item	Number of item/s	Total
TOTAL COST			

Target Audience

Do you have any networks or additional ideas for promotion

Program Pitch

(In three sentences, how would you like to promote your activity in the Active Albany Publication)

Participants to bring

Level of involvement (Please indicate which option you would like to participate in)

Financial Honorarium

(Applies to individual Activity Leaders only)

Includes:

- \$40 per session
- A standard session is 1.5 hour includes 30 minutes for preparation/set/pack up
- Honorarium Registration Form to Complete.

Bank details (Individual Activity Leader to complete only)

Bank Name

Account Name

BSB Number

Account Number

ALAC Membership Reciprocal Arrangement Options

(Applies to individual Activity Leaders only)

ALAC Membership	Valued At	Active Albany Contribution
3 Month Aquatic or Gym	\$240.00	Total 16 hours per Term
2 Month Aquatic or Gym	\$160.00	Total 8 hours per Term
10 Multi Pass Swim or Gym	\$54.00	Total 4 hours per Term
3 Month Aquatics and Gym	\$293.30	In excess of 16 hours per Term

Terms and conditions apply. Offer applies to applicants that have applied for the ALAC membership reciprocal arrangement option. This membership can only be used by one independent user. The independent Activity Leader can choose to offer up their membership through a raffle or carry membership over to a friend, therefore forfeiting ownership of their membership. This membership is valid for the period of time selected unless a multi visit card option is selected therefore this membership will have no expiry date. Membership option is final. Membership needs to be used by 12 months from awarded date.

Partnership

(Applies to organisations and agencies only)

Includes:

- Promotion of the activity in our quarterly Active Albany program newsletter.
- Coordination of the enrolments and administration support for your activity.
- Insurance cover for the activity.
- Access to City venues (free of charge).
- Recognition of your agency/business in all promotional material and website.
- Combined partnership approach to deliver greater opportunities for fitness, health, sport and recreation in the City of Albany.
- Where a business or organisation may be required to incur costs to provide the activity, financial arrangements and the setting of participant fees will be negotiated on a case-by-case basis with the focus on keeping the activities accessible to all.
- Importantly, participating in Active Albany has the potential to increase members or clients for your business, club or organisation.

Activity Leader Qualification: (All parties need to comply with qualification requirements, if required)

<input type="checkbox"/> Working With Children Check	<p>If your activity involves working with children under the age of 18, it is compulsory that you hold a valid Working With Children's check.</p> <ul style="list-style-type: none"> • WWC will need to be sighted and recorded by a Recreation Services staff member for safety and insurance purposes.
<input type="checkbox"/> Bronze Medallion	<p>If your activity involves a water based activity, it is compulsory that you hold a current bronze medallion or a community surf rescue equivalent.</p>
<input type="checkbox"/> Risk Assessment and Management Plan	<p>Activity Leaders will need to complete a basic risk management assessment spreadsheet. Recreation Services will then review the assessment and contact the Activity Leader if they are required to provide any more information based on the activity's risk score before commencing the activity. Activity Leaders will have appropriate experience delivering activities involving participants with specific or higher support needs.</p>
<input type="checkbox"/> High Risk Activities	<p>If your activity is high risk you are required to provide evidence of necessary qualifications required and to complete a risk assessment.</p>
<input type="checkbox"/> Coaching Certificate	<p>Whilst not being compulsory it is desirable that Activity Leaders obtain or have experience in the activity they wish to deliver.</p> <ul style="list-style-type: none"> • A level 1 coaching certificate (Community Coaching General Principles) can be obtained online through Australia institute of Sport (free to enrol). <p>learning.ausport.gov.au/auth/login/?returnUrl=%2F</p>
<input type="checkbox"/> First Aid Certificate <small>(Activity Leaders will require a first aid certificate if activity is delivered outside of ALAC's facility)</small>	<p>Whilst not being compulsory it is desirable that Activity Leaders obtain a first aid certificate.</p> <ul style="list-style-type: none"> • Basic first aid training can be completed through St Johns two day training course stjohn.org.au/first-aid-training

Declaration

I declare that I:

- Have thoroughly read and understood all aspects of the Activity Leader Application Form.
- Have completed all areas that require acknowledgment with correct and true information.
- Possess the current certifications required to deliver my chosen activity.

Signature: _____

Date received:

Approved

Not approved

Date entered into database:

Date organisation/agency advised of outcome:

Date Individual Activity Leader advised of outcome:

Staff name: _____

I have processed this form in accordance with Recreation Services procedure.
I declare all information has been looked over carefully to ensure the form is true and correct.

Staff Signature: _____