

**EVENTS SPONSORSHIP SCHEME 2018/19
RANGITIKEI DISTRICT COUNCIL
FINAL WRITTEN REPORT**

Please return to: Grants Administrator
By mail: Rangitikei District Council, Private Bag 1102, Marton 4741
Or hand deliver to: Rangitikei District Council Office, 46 High Street, Marton; or
Taihape Service Centre, Hautapu Street, Taihape
Or by Email to: info@rangitikei.govt.nz

**TO BE RETURNED NO LATER THAN THREE MONTHS AFTER THE COMPLETION OF THE
EVENT, ACCOMPANIED BY AN INCOME AND EXPENDITURE REPORT**

Name of organisation undertaking event:

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Name(s) of contact person(s):

Name of event:

Date of event

Type of event:

High profile event

Community event

High profile, community event

One-off event

New recurring event

Established recurring
event

Date sponsorship was granted:

Amount of sponsorship:

Please answer the following questions using additional sheets if necessary

1. Who attended the event (estimated numbers and description)?

Resident in Rangitikei District?		Visitors from neighbouring Districts ¹ ?	
Visitors from the rest of New Zealand?		Overseas visitors?	
Total			

1.1 Was this attendance

- More than you expected?
- What you expected?
- Less than you expected?

2. Did the event go as you had planned?

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a. What worked well/was successful?

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b. What didn't work so well/could be improved?

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3. How did the event enhance community health and wellbeing?

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a. Which of the following options were promoted?

- Smoke-free
- Sugar-sweetened-beverage-free
- Water only
- Healthy food options
- Alcohol safety / harm minimisation

¹ Horowhenua, Manawatu, Ruapehu, Palmerston North, Taranua and Whanganui.

- b. What support and information would have been helpful to increase promotion and/or participation in Healthy Families principles?

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- 4. Please describe how you promoted the support of the Rangitikei District Council for your event (attach examples of leaflets or publicity if appropriate).

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- 5. Please complete the attached income and expenditure statement for your event, showing all income and expenditure associated with the event.

Surplus/(deficit) \$.....

- 6. Do you intend to hold this event again next year?
 - a. If so, please outline your strategy to increase income generation for this event next year.

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Income and expenditure statement

(Please list all income and expenditure associated with the event)

Income	Amount	
Donated material	\$	
Cash in hand towards project	\$	
Intended fundraising (provide an estimate)	\$	
Ticket sales	\$	
Other sponsorship/grants (please specify source/s below)		
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Total income (GST inclusive / exclusive delete one)	\$	
Expenditure	Amount	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Total expenditure (GST inclusive / exclusive delete one)	\$	
Surplus / Deficit (GST inclusive / exclusive delete one)	\$	

Signature _____ Date _____

Print Name _____