

Year of Indigenous Tourism

Event Subsidy Application Form

Purpose	To assist First Nations people to attend key tourism events throughout 2021
Closing Date/Time	Applications need to be submitted at least 2 weeks prior to the event date.
Application Pack	Ensure you read all information in the Event Subsidy Guidelines before completing this form. The guidelines are available on the QTIC website . Applications will be assessed using the process outlined in the guidelines.
Application Help	If you require assistance or support in submitting this application form, please call 3236 1445
Completing this application form	Unless marked, all sections of this form must be completed.
How to lodge?	<p>Application forms can be completed and submitted via email to rhonda.appo@qtic.com.au and must be lodged by the closing date/time above. Applications submitted after this time will not be considered.</p> <p>QTIC will acknowledge receipt of your application.</p> <p>Please email rhonda.appo@qtic.com.au or call 3236 1445 if you have not received acknowledgement within 5 working days of submitting your application.</p>

Personal Details

Title: _____ Given Name: _____ Surname: _____

Present Position/Title: _____

Organisation: _____

ABN: _____

Work Address: _____

Suburb: _____

Telephone (W): _____ Mobile: _____

Email: _____

Please indicate which event you want to attend:

World Indigenous Tourism Summit – 31 Oct – 4 Nov 2021, Perth

Destination IQ – 10 Nov 2021, Brisbane

Destination Q – 11 Nov 2021, Brisbane

Other, please specify (a specific event that falls within a specialist tourism category)

Eligibility Criteria

To be considered for this subsidy you must

Identify as an Aboriginal and/or Torres Strait Islander person

Reside in Queensland

Be actively engaged in the tourism sector

You must also meet at least 2 of the following criteria. Please indicate which applies to you:

I am, or my organisation is, a QTIC member

I am, or my organisation is, a member of our regional tourism organisation

I am, or my organisation is, a member of a Prescribed Body Corporate

I am gaining relevant specialised knowledge at the conference

I am presenting at the conference

Briefly explain why the conference will be beneficial for you professionally:

Briefly explain how this will benefit your business:

Upon evaluation of this form, the applicant will be notified by QTIC as either successful or unsuccessful. If successful, QTIC will register on behalf of the applicant however it is the responsibility of the recipient to organise their own travel and accommodation arrangements.

Conditions of the subsidy

I agree that if my application is successful:

- QTIC can register on my behalf using the information provided in this form
- I will inform QTIC of any changes impacting attendance of the event.

I acknowledge that:

- QTIC has authority to accept/decline applications based on the eligibility criteria.
- QTIC will register for the event on my behalf and all other arrangements are my responsibility.
- Tickets are non-transferable.
- I may be asked to take part in an interview with QTIC and DTIS following my attendance at the event to share my experience and learnings.
- By providing my personal information and submitting an application, I agree that my information will be used and disclosed by QTIC in accordance with their Collection Statement and Privacy Policy, available at <https://www.qtic.com.au/privacy-policy/>
- My employer (where appropriate) has in place current insurance policies for workers compensation and motor vehicle third party insurance, and that these policies will be maintained for the duration of the approved conference that I am attending.

Declaration

I declare that I have read and understood the Conditions of the Event Subsidy, and that the information I have provided on this form is correct and complete.

Grant Applicant

Print name: _____

Signature: _____

Date: _____

OFFICE USE ONLY

Application received on (DD/MM/YYYY): __ / __ / ____

Notified of receipt on (DD/MM/YYYY) __ / __ / ____

Applicant registered in CRM Yes No

Logged application onto system Yes No

Date of Review: __ / __ / ____

Reviewed by: _____

Status (successful/unsuccessful): _____

Notified of outcome: Yes No

Notified of outcome on (DD/MM/YYYY): __ / __ / ____

Registration completed on: __ / __ / ____

Person responsible for registering: _____