

# STATEMENT OF SUPPORT FORM 2023/2024

STATE SPORTING ORGANISATION (SSO) and  
NATIONAL SPORTING ORGANISATION (NSO)

SSO/NSO Name:		
Organisation Name (organisation making application):		
Project Contact Person: (person making application):		
Project Title:		
Project Address:		
What are the likely benefits for the SSO/NSO/sport if the project is funded?		
<b>The project strongly aligns to the SSO/NSO's:</b>  Please Tick	Strategic/Participation Plan  Facility Plan/Strategy  Future Needs of Sport Infrastructure Study Priorities Competition/  Event Activation Plan  Reconciliation Action Plan/Women's Sport Strategy	
<b>Please indicate the level/significance of the facility:</b>  (Sport Facility Hierarchy and/or Competition Hierarchy)  Please Tick	<b>Current</b>  National/International  State  High Performance/Centre of Excellence  Regional/District  Local	<b>Future (project completed)</b>  National/International  State  High Performance/Centre of Excellence  Regional/District  Local

**The proposed project meets the facility requirements & standards relevant to the facility hierarchy**

(e.g. dimensions and technical specifications, lighting, playing surface, change room)

**Please indicate SSO/NSO financial contribution towards the project (if applicable)**

SSO/NSO cash contribution to the project is: 2023/24: \$ \_\_\_\_\_

2024/25: \$ \_\_\_\_\_

2025/26: \$ \_\_\_\_\_

Contributions will be provided with the following conditions:  
• (list any conditions)

There are no conditions attached to these contributions.

Authorisation: I am authorised delegate on behalf of the NSO/SSO with the authority to complete this document.

**Signed:**

**Name of signatory:**

**Position held:**

**Contact Number:**

**Email:**