



# Peak2Park

HEALTHY ACTIVE LIFESTYLES TOOWOOMBA

# BENEFICIARY APPLICATION FORM 2022

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## Peak2Park Fun Run/Walk

Held annually on the  
first Sunday in March



[www.peak2park.org.au](http://www.peak2park.org.au)

**Thank you for your interest in becoming a beneficiary for Peak2Park. Please fill out this form and deliver to us in the below options:**



**Post 5 copies of this completed application form with all documentation required: Healthy Active Lifestyles Toowoomba (Inc) organising committee Peak2Park, PO Box 1303 Toowoomba Qld 4350**



**Or deliver to: Healthy Active Lifestyle Toowoomba (Inc) organising committee Peak2Park: Willows Professional Suites, Willows Health & Lifestyle Centre, 55-57 Kitchener Street Toowoomba Qld**



**Or email to: [info@peak2park.org.au](mailto:info@peak2park.org.au)**

**1. Beneficiary Applicant Details**

Organisation Name

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ABN

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Registered for GST                      Yes                      No

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Postal address

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Contact Person

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Role within Organisation

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Phone

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Email

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**2. Which of the following best describes your organisation?**

Not for Profit Organisation

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Incorporated Community Organisation

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Local Government Authority  
(on behalf of a Not for Profit Organisation)

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Other (Please specify)

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**3. Briefly describe how funds from P2P would be used in your organisation?** (Max. 150 Words)

**4. Identify the positive outcomes your organisation and the Toowoomba and district communities will receive as a result of these funds?** (Max. 150 Words)

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# Our Values

parklands inclusive holistic  
holistic integrity professionalism  
change fun encouragement  
**movement** friendly engage  
positivity inclusiveness focus  
valued **family**  
beautiful community caring  
welcoming

## 5. Level of commitment sought from your organisation

*(NB desirable but not essential – it is understood that small organisations may have contacts but not a large membership base from which to draw volunteers)*

Please indication if your organisation could assist with the follow tasks at the next P2P event:		
Marshalling at Picnic Point before event	Yes	No
Assisting with directing parking at Picnic Point before event	Yes	No
Cutting up fruit at the finish line prior to end of event	Yes	No
Supporting event participants by lining course route at finish line	Yes	No
Ability to help identify and secure sponsorship?	Yes	No

**Please briefly outline further areas where you believe you or your organisation could contribute to the success of the P2P event:**

## 6. How will your organisation recognise the support provided by P2P?

P2P logo on written materials relevant to projects attracting funds	Yes	No
P2P logo on website	Yes	No
P2P in social media presence	Yes	No
Other (Please specify)		

**Note: permission in writing must be sought prior to any use of the P2P logo or name.**



# 10. Project support

Please provide two (2) letters of support from clients or businesses or local/state government agencies or personnel involved with your charity. Attach these as Appendix I.

# 11. Conditions of beneficiary funding

Beneficiary funding is subject to agreement that funds allocated by P2P committee are to be used specifically for the project outlined in this application and payable to the applicant and are not transferable to another party. Any unspent beneficiary funds not used to complete the project are required to be repaid to the HALT committee.

**NB** At the conclusion of your project, a form or letter of acquittal of the P2P allocated funds is required by the P2P organising committee.

# 12. Application declaration

I, (name)	(role)
of (organisation)	

do hereby declare that all of the information supplied in this beneficiary application is, to the best of my knowledge, accurate and complete and I wholly agree to the conditions of funding as outlined in item 11 of this application form.

Signature	Date
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**Additional enquiries**

The Secretary, Healthy Active Lifestyle Toowoomba (Inc)  
organising committee Peak2Park

Phone 0422 867 929    Email [info@peak2park.org.au](mailto:info@peak2park.org.au)

# Peak2Park - Appendix 1

Two (2) letters of support from clients or businesses or local/state government agencies or personnel involved with your charity.

**Letter 1**

[Click here if attaching in the PDF](#)



## **Letter 2**

[Click here if attaching in the PDF](#)



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**Thank you**



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