

Destination Event Attraction Form 2025/2026 Stage 1

Form Preview

Introduction

* indicates a required field

Introduction

Frankston City Council (FCC) is seeking expressions of interest from creative event producers to curate and deliver a single or series of events, from concept through to presentation, in Frankston City.

The application process will take place over two rounds, with successful applicants from round 1 being invited to provide further detailed information about their proposed event in round 2.

We encourage event organisers to submit concepts for consideration, no matter at what stage in the conceptual process the project is at. Both new ideas and established concepts are welcome.

Overview

Before you start your application, please ensure you have read the **Program Guidelines**, available at [Destination Event Attraction Program](#)

Download and review the full application form to understand what documents and supporting information you will be required to submit as part of the application.

Destination Event Attraction Program 2025/2026

Frankston City is a premier events destination in Melbourne's south-east. The Destination Event Attraction Program (DEAP) has been developed by Frankston City Council to support the ongoing attraction of events which will enliven the community and enhance lifestyle, drive visitation and result in positive creative, economic and social outcomes.

The DEAP is a centrepiece to the Council's program to strengthen Frankston City's positioning as a destination for major and seasonal events and rejuvenate the City's broader visitor economy.

The DEAP offers cash and in-kind sponsorship to support suitably experienced creatives, collaborators and event organisers to curate and deliver a single or series of events from concept through to presentation in Frankston City.

Program Objectives

The program is seeking applications for events that will:

Position and build Frankston's reputation as a Creative Events Destination

- Deliver high calibre events
- Enhance Civic pride, transform perceptions and stimulate imaginations
- Present unique and Distinctly Frankston experiences which drive visitation and create social media worthy moments
- Achieve significant media attention and reach
- Inspire creative community, embrace bold ideas and creative ambition
- Celebrate cultural diversity, inclusion and accessibility

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- Showcase the City's lifestyle and cultural assets, delivering experiences which are distinctly Frankston
- Expose and attract new audiences to Frankston City
- Drive economic and branding benefits to the local economy

I have read and understood the Destination Event Attraction Program Guidelines *

Yes

Eligibility

* indicates a required field

Applicants: please note

Before completing this application form, you should have read the [Program Guidelines](#).

Incomplete applications and/or applications received after the closing date will not be considered.

This section of the application form is designed to help you, and us, understand if you are eligible for this grant.

Eligibility Check List

Will the event take place within the Frankston City Local Government Area? *

Yes

Will the event include creative or cultural elements?? *

Yes

Will the event have economic, social or community benefit? *

Yes

Do you have a valid and active Australian Business Number (ABN), or are you a not-for-profit/community group? *

Yes

Will you be able to provide Public Liability Insurance to the value of \$20,000,000 and be willing to list Frankston City Council as an interested party? *

Yes

If successful, will you have the means and capability to deliver the event concept proposed? *

Yes

Contact Details

* indicates a required field

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Applicant Details

Applicant *

Individual Organisation

Organisation Name

Title First Name Last Name

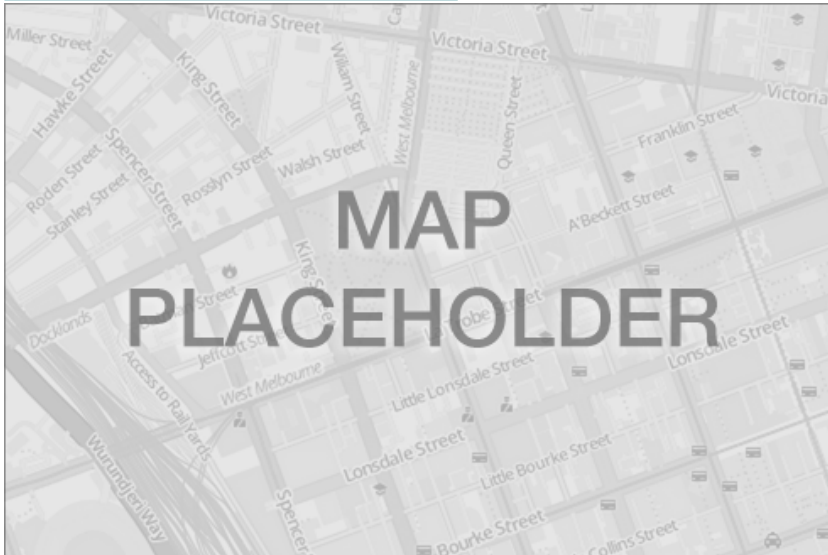
<input type="text"/>	<input type="text"/>	<input type="text"/>
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For organisations: please use the organisation's full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

Applicant primary address

Address

<input type="text"/>
<input type="text"/>



Applicant postal address

Address

<input type="text"/>
<input type="text"/>

Applicant primary phone number *

Must be an Australian phone number.

Applicant email address *

Must be an email address.

Applicant website (if applicable)

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Must be a URL.

Primary Contact Details

Primary contact *

Title First Name Last Name

This is the person we will correspond with about this grant.

Position held in organisation *

e.g., Manager, Board Member or Fundraising Coordinator.

Primary contact phone number *

Must be an Australian phone number.

Primary contact email address *

This is the address we will use to correspond with you about this grant.

Organisation Details

* indicates a required field

Does your organisation have an ABN? *

Yes No

Applicant ABN *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information

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ACNC Registration
Tax Concessions
Main business location

As you do not have an ABN, please submit a completed ATO Statement by a Supplier Form with your application, otherwise 48.5% of any approved grant may be withheld. Download the form from [the ATO website](#).

Please upload completed Statement of Supplier Form: *

Attach a file:

Max 25mb per file uploaded

What is your incorporation number?

Incorporated Association or Australian Company Number

Project Details

* indicates a required field

Event name *

Provide a name for your project/program/initiative. This can be a working title if you do not have one yet.

Anticipated start date *

If unknown, provide your best guess

Anticipated end date

If unknown, provide your best guess

Please give us a clear description of what your event concept is, the desired outcomes and how it aligns with the criteria and priorities of the DEAP program. *

Word count:

Must be no more than 500 words.

Be descriptive, but succinct. This is your opportunity to pitch a summary of the elements of the project that you believe make it appealing. Include a high level overview of what the event is, a brief summary of who this event is for (i.e. audience and demographic), what you will do (i.e. what activities and elements will be included in the event), and what outcomes you expect to result from your activities (benefits - social, economic, etc).

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Please let us know why you believe this event concept would suit Frankston *

Word count:

Must be no more than 150 words.

Tell us why your event would be successful in Frankston City, and what local assets and/or culture this project would draw or build upon. Will it engage with local businesses, community and will it bring new audiences to Frankston?

Does the event plan to enhance or elevate the offering of an existing event in Frankston City? If so please provide details. *

Word count:

Must be no more than 150 words.

For example, does the project occur at the same time as The Waterfront Festival or South Side Festival, and elevate that experience?

What do you expect the cost to attend the event will be? *

- Free
- Less than \$20 per person
- Between \$21 and \$50 per person
- Over \$50 per person

What is the planned location for the event? *

If you do not have a specific site in mind, please detail the elements you are looking for in a location

If successful, would this event become a regular or annual event? *

- No, it is a one-off event
- Yes, it would be held annually

How many people do you expect would attend the event in total? *

Must be a number.

If the project runs for multiple days, this total is for the entire duration of the event

How have you reached this attendance estimate? *

e.g. previous attendance numbers, similar events or market research

What percentage of attendees do you estimate would visit from outside of the Frankston City area? *

Must be a whole number (no decimal place) and between 1 and 100.

Do you expect the event will engage with any local suppliers? If so please list your initial ideas. *

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This could include suppliers for marketing, printing, food and beverage, sponsorship or partnerships.

Budgets

* indicates a required field

Estimated total cost of the project *

\$

What is the expected total cost (dollars) of the project? This is an estimate based on best available information at the time of application. If successful, applicants will be required to provide a detailed budget as part of Stage 2 in the process.

Requested funding *

\$

What is the total cash amount you are requesting to support this event.

How will this funding be allocated to the project? *

Briefly outline which elements of the event the money will be spent on.

Revenue

Please list any additional revenue streams for the event, including an amount. This could include items such as ticketing revenue, food and beverage sales, sponsorships, merchandise or other grants.

These are just initial estimates. If successful, applicants will be required to provide a detailed budget showing revenue streams, as part of Stage 2 in the process.

Income

\$

Income	\$
<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>

Revenue Totals

Total Income Amount

\$

This number/amount is calculated.

Supporting Documentation

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* indicates a required field

Capacity

Now that we know about your event, we want to find out more about your ability to undertake the work you propose. Please provide some information about yourself that will give us confidence that you can resource and deliver this project through to completion. *

Provide information about any past work that may demonstrate your capacity to undertake this project, as well as links or references to support.

Reference content

Please attach any artwork, images or video to illustrate your proposed vision *

Attach a file:

A maximum of 5 files may be attached.

Please attach a document of compiled Bios/CVs of at least one member of the leadership and/or creative team

Attach a file:

A maximum of 1 file may be attached.

If applicable, please attach any relevant media or press the event (or other similar events you have produced) has had in the past

Attach a file:

Certification and Feedback

* indicates a required field

Declaration

Have you completed all sections of the application?

Please remember applications that are incomplete will be deemed ineligible.

Please ensure you carefully check your application before submitting. Once your application has been submitted you will not be able to make changes.

Privacy and confidentiality

The personal information requested on this application is being collected by Frankston City Council for the purpose of the Destination Event Attraction Program.

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Information supplied including event concepts and intellectual property will be treated as commercial in confidence and not distributed or discussed beyond the Selection Panel and as required for decision-making.

This information will be used solely by Council and the Selection Panel for the primary purpose or directly related purposes and will not otherwise be disclosed without your consent or as required or permitted by law.

You may apply to Council for access and/or amendment of the information by calling Ph. 1300 322 322

Declaration: *

- I/We confirm all of the information contained in this application is true and correct at the time of submission.
 - I/We understand once lodged, I/we must not withdraw our application for a period of 60 days
 - I/We understand that the level of funding and/or support requested in this application is not guaranteed
 - I/We understand that Frankston City Council are not bound to accept any application received and Council will not pay any expenses incurred by preparing and submitting this Application
 - I/We are eligible to submit this application on behalf of the organisation listed
- At least 5 choices must be selected.

Do you have a perceived or actual conflict of interest with any of the following persons: *

- Relationship with a staff member or Councillor
- Relationship with family or friends of a staff member or Councillor
- Financial Interest
- Outside work activities (paid/unpaid)
- Conflict of duty e.g. membership of another Public sector or private organisation
- Other:

- None

At least 1 choice must be selected.

If you have a conflict of interest (or any potential for a conflict of interest) concerning this application, please detail the conflict or potential conflict below:

Privacy

Frankston City Council is committed to protecting your privacy. The information collected in this Stage 1 form will be used to assess your eligibility for a Destination Event Attraction Program Grant 2025-26. Contact details provided in your application will be used to communicate with you further as required. The business name, project description and grant amount awarded for all successful applications will be made public. Your contact details may also be used to send you information relating to Council services for businesses. Personal information will only be used and disclosed as authorised by law. For more detail about how your information will be handled, or to access your information, see Council's privacy.officer@frankston.vic.gov.au or contact Council's privacy officer on 1300 322 322.

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Conflict of Interest

To the best of my knowledge and belief, any actual, perceived or potential conflicts between myself, my business and Frankston City Council and/or the designated Council Project Manager have been fully disclosed in this declaration form. I acknowledge and agree to comply with any directions from Frankston City Council in respect of any actual, perceived or potential conflict of interest.

Name *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Organisation Name *

Position *

Phone Number *

Must be an Australian phone number.

Date *

Must be a date.

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback..

Please indicate how you found the online application process:

- Very easy Easy Neutral Difficult Very difficult

How many minutes in total did it take you to complete this application? *

Estimate in minutes i.e. 1 hour = 60

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we should consider.

Where did you learn about this grant program?

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E.g. mailing list, LinkedIn, Council website, etc.