



TRIM Reference: _____

REQUEST FOR KEYS TO THE CITY

PERSON REQUESTING KEYS TO THE CITY

Title: _____ Surname: _____

Given Names: _____

Australian Military/Civilian Unit: _____

Address: _____

Phone Number: _____ Mobile Number: _____

Email Address: _____

DETAILS OF PREVIOUS KEYS TO THE CITY *If Applicable*

DETAILS OF KEYS TO THE CITY FUNCTION

Please describe the following:

- How the individual or organisation furthered the ideals of the City of Greater Geraldton.
- Details of outstanding achievement in sport or humanitarian work at an international level.
- Details of why request is required.
- Required date, time and proceedings for the event.
- Appropriate gift, which could be presented at the event.
- Support information may be attached to this application.

DETAILS OF REFEREES

Person/s who are able to make direct comments in this request:

REFEREE ONE

Title: _____ Surname: _____

Given Names: _____

Community Organisation: _____

Address: _____

Phone Number: _____ Mobile Number: _____

Email Address: _____

REFEREE TWO

Title: _____ Surname: _____

Given Names: _____

Community Organisation: _____

Address: _____

Phone Number: _____ Mobile Number: _____

Email Address: _____

ADDITIONAL INFORMATION