

St John NT Heart Grant Application Form

The St John NT Heart Grant program aims to make Automated External Defibrillators (AEDs) more accessible in our community.

Generously supported by the Northern Territory Government's Community Benefit Fund, there are 50 AED kits available to local community organisations, sporting groups and not-for-profits.

Valued at over \$2,500, the kit includes a fully automated St John G5 iCPR AED, AED Ready Kit, outdoor windowless cabinet with keypad, 90-degree AED sign, A3 poster, and AED training.

Applications are open until **30 June 2025**, unless all AED kits have been allocated prior to this date. Applications will be assessed as received.

Submit your completed application to St John NT by:

Email: heartgrant@stjohnnt.asn.au

Post: PO Box 40221 Casuarina NT 0810

If you have any questions or require assistance with the application, please contact:

Email: heartgrant@stjohnnt.asn.au

Phone: (08) 8935 2500

Thank you for your commitment to saving lives and building community resilience.

Terms and Conditions

1. The St John NT Heart Grant program is open to Northern Territory community organisations, sporting clubs and other not-for-profit organisations.
2. The AED must be installed in a location that is publicly accessible, 24/7.
3. Successful applicants will be invoiced a **one-off payment of \$249.00** upon approval of the Heart Grant application.
4. The invoice must be paid prior to receiving the Heart Grant public access AED.
5. The organisation will ensure the upkeep of the public access AED, and agree to be responsible for its **ongoing costs**, including replacement of pads and batteries as required.
6. The public access AED must be registered on the **St John First Responder App**.
7. The organisation will notify St John NT prior to the public access AED being relocated at or removed from the designated location.
8. The organisation will **promote** their successful acquisition of the public access AED through the St John NT Heart Grant program, and its location at the premises.

Making AEDs *accessible* to our community

Application

Section 1: Organisation Details

Name of organisation/community group/association:

ABN or relevant registration number:

Type of organisation: (e.g., sporting club, community group, not-for-profit)

Street address:

Postal address: (if different than above)

Primary contact name:

Role in organisation:

Email:

Phone number:

Secondary contact name:

Role in organisation:

Email:

Phone number:

Number of staff who will require AED training:

Section 2: Proposed Location of Public Access AED

Address:

Is this location publicly accessible? Yes No

Reason for choosing this location:

Does the organisation have express permission for installation at this location? Yes No

If no, please provide details of the permission required or steps required to obtain it, and the anticipated approval date:

Proposed installation date:

Section 3: Declaration and Signature

By submitting this application, I (on behalf of the organisation) acknowledge and agree to the St John NT Heart Grant Terms and Conditions and declare that the information provided in this application is true and correct to the best of my knowledge.

Full name:

Organisation:

Role in organisation:

Signature:

Date:

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