



Consent Form

Westfield Local Heroes is a community recognition and grants program, connecting and enriching communities. Westfield Local Heroes are nominated and voted for by their communities, with three finalists per Westfield centre each awarded a \$10,000 grant to support their affiliated organisation's work, programs or activities.

To be eligible, nominees must be affiliated with a registered entity or organisation whose work, activities or programs promotes social wellbeing and/or harmony, across one or more of the three social values of family, youth opportunity or inclusion.

This consent form must be completed by the nominee and a representative from the Affiliated Organisation, and uploaded as part of the online nomination. Nominations are accepted between 23 April and 16 May at www.westfield.com.au/local-heroes (if in Australia) or www.westfield.co.nz/local-heroes (if in New Zealand).

NOMINEE TO COMPLETE

I understand I have been nominated in the Westfield Local Heroes program. I confirm I have read and understand the [Privacy Policy](#) of Scentre Group (owner and operator of Westfield Centres in Australia and New Zealand) and have read and agree to be bound by the Westfield Local Heroes [Terms and Conditions](#).

Nominee Name

Please provide your preferred contact details so we can contact you about the progress of your nomination.

Email

Phone

Parent/Guardian signature required if the nominee is under 18 years of age.

I understand _____ has been nominated in Westfield Local Heroes. On their behalf, I confirm I have read and understand Scentre Group's [Privacy Policy](#), and have read and agree to be bound by the Westfield Local Heroes [Terms and Conditions](#).

Parent/Guardian Name

Relationship to Nominee

Age of Nominee

REPRESENTATIVE FROM AFFILIATED ORGANISATION TO COMPLETE

Organisation Name

Australian Business Number (ABN) or Australian Company Number (ACN) or New Zealand Business Number (NZBN)

On behalf of the above-named organisation, I confirm I have read and understand Scentre Group's [Privacy Policy](#), and agree for the afore-mentioned organisation to be bound by the Westfield Local Heroes [Terms and Conditions](#).

Please provide your contact details so we can contact you about the progress of the nomination.

Organisation Representative Name

Position

Phone

Email

NOTE: If you, the nominee, are also a managing executive of the affiliated organisation, you can complete the Affiliated Organisation endorsement.