

Community Grant Application

Personal information on this form is collected under the legal authority of the Municipal Act, as amended. This information is collected and maintained for the purposed of creating a record that is available to the general public, pursuant to Section 27 of the Municipal Freedom of Information and Protection of Privacy Act. Questions about this collection should be directed to the Clerk, at 22413 Hoskins Line, Rodney, ON 519-785-0560 or jnethercott@westelgin.net

Name of Applicant/Organization/Service Club/Community Group *

Contact Person Name

Position held in organization/group

Email Address

Phone Number

Mailing Address

Municipality

Postal Code

Website

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Specifics of Event/Project/ Program funds or in kind support is requested for:

Total Project Budget

Amount of Funds Requested from Municipality of West Elgin

In Kind Support Requested from Municipality (please indicated In Kind request and any monetary value associated with this)

Have you applied to the Municipality of West Elgin for Community Funding in the past? if so please detail

Do you wish to present your request in person to Council?

- ☐ Yes
- ☐ No
- ☐ If required

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Are you a non-profit organization?



☐ Yes

☐ No

Please enter your Charitable registration number

Date of Incorporation

Grant Category

- ☐ Youth/Senior Event
- ☐ Community Beautification
- ☐ Arts, Culture and Heritage Tourism Development
- ☐ Community Special Event
- ☐ Capital Funding for Specific Project
- ☐ Other - one time grant request

Please explain the one time event funds are requested for

Please provide a brief history of your organization.

Is your group able to issue charitable tax receipts on its own?

- ☐ Yes
- ☐ No

What are the general objectives/services of your organization?

In what geographical area does your organization operate?

Do Volunteers participate in your organization?

- ☐ Yes
- ☐ No

Number of Volunteers

Please Provide a list of Executive Officers of your organization

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Project Information

Please provide a brief description of the event, program or event. Include goals and timelines.

Is this a new project or initiative?

- ☐ Yes
- ☐ No

Please describe how the funding will enhance your current program.

Describe the specific purpose that the grant funds would be used for.

Does this application include in kind grant requests?

☐ Yes

☐ No

Please provide details of in kind requests (ex. Materials, equipment, staffing resources)

Please list all other funding sources for supporting this event/program/project

Who will benefit from the proposed Event/Project/Program?

Is your grant request for more than \$500.00?

☐ Yes

☐ No

Grant request over \$500.00 require submission of Financial Statements. Please submit Financial Statements.

Please upload a project budget 

2021 West Lorne Santa Claus Parade Budget

Expenses	Budgeted Amount
O'Moka Pipe and Drum band	\$ 600.00
2nd Band (preferably Cadets)	\$ 600.00
Advertising	\$ 350.00
Candy (Mr and Mrs Claus)	\$ 100.00
Prize Money	\$ 175.00
Float repairs	\$ 200.00
Replacement lights	\$ 100.00
xmas tree	\$ 100.00
gas for generator	\$ 50.00
Food & Bevs Volunteers	\$ 150.00
Storage, Driver, Santa/Mrs Claus	\$ 150.00
Misc	\$ 100.00
	\$ 2,675.00