

# **Town of The Blue Mountains Grants and Donations Committee Application Form**

## **Applicant Information**

Address:		
City/Town:	Postal Code:	
Contact Person:	Position/Title:	
Telephone:	Fax:	
Email:	Website:	
Organization Information		
What is your Organizations status?	For profit	
	Not-for-profit	
Fiscal year of Organization (Month/	Year to Month/Year)	
Amount of Grant Request		
Cash:	Subsidization:	
Financial Information:		

If successful, indicate how the funding would be used by your organization.

### **Part A: General Information**

#### **Board of Directors**

Please use the space below to provide the name and title for each member of your organizations Board of Directors, along with each member's title.

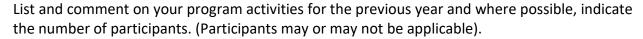
## Describe who your organization serves

For example, who is your organization's audience?

## Describe your organization's membership

Include the number of members, as well as any membership fees.

<b>Summary</b>	of	previous	year's activities
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#### **Part B: Financial Information**

### **Fundraising**

Indicate your organizations fundraising policy. Comment on your organizations fundraising plans for both the current and upcoming years.

## **Fundraising Revenues**

Does your organization raise enough money through fundraising to cover its expenses? If not, indicate your organizations plan to pay these expenses.

#### **Part C: Grant Information**

### Summary of previous grant(s)

Include any subsidies. Indicate how the previous municipal grant(s) was applied by your organization. Indicate if you received funding from sources other than the municipality.

#### The Town of The Blue Mountains Vision

Explain how your organization's event/initiative/project aligns with the Town's Vision: "Encompassing the best of Ontario Experience. A complete community designed to last, where opportunities abound."

# Part D: Projected Budget

Please fill out the projected budget for your organization's event/initiative/project in the chart below.

Revenue Description	Budget Amount
Grants – Federal and/or Provincial	\$
Grants – Town of The Blue Mountains	\$
Donations/Sponsorships	\$
Earned Income	\$
Applicant Contribution	\$
User Fees	\$
Membership Fees	\$
Fundraising Efforts	\$
Other (please specify)	\$
Total Revenue	\$

Expenses Description	Budget Amount
Salaries and Benefits	\$
Advertising and Promotion	\$
Entertainment	\$
Administration	\$
Facilities Rental	\$
Prizes and Awards	\$
Other (please specify)	\$
Total Expenses	\$

Please ensure that your application also includes your organization's most recent financial statement.

### **Part E: Signatures**

By signing below, the authorized representatives of the organization acknowledge that they have fully read and understand the Guidelines and Criteria for the Grants and Donations Program and that the information included in this application is true and correct to the best of their knowledge.

	Michele Myrah
Print Name	Signature
Position/Title	 Date
	Robert Brown
Print Name	Signature
Position/Title	Date

Please submit your completed application to: finance@thebluemountains.ca OR

Grants and Donations
Finance and IT Services
Box 310
32 Mill Street
Thornbury, Ontario
NOH 2P0

If you have questions regarding the application, or application process, please contact finance@thebluemountains.ca or 519-599-3131 ext. 227.