

## 2025 GRANTS AND DONATIONS APPLICATION FORM

The purpose of this program is to support local community groups and eligible organizations in obtaining donations, waiver of rental fees, etc. in support of local events, programs and fundraisers. The project should meet local needs, involve and empower people, and have an aim of sustainability.

Applications can be submitted at anytime; however, all applications must be received by **September 30, 2024**. Staff will review the applications and prepare a report for council approval. All applicants will be notified of the decision when the 2025 Budget is approved by Council.

| Organization/Business Name and Address:  |  |
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| Contact Name and Address:  |  |
| Contact Telephone:   | Contact Email:                                 |
| Organization Website:  |  |
| Please select the category you are applying for (select  | et all that apply:                             |
| ☐ Signature Event (cash only) ☐ Local Event: (☐ C☐ Program (use of space only) ☐ Special Activity (cash) |  |
| Amount Requested:  | Percentage of Overall Cost:                    |
| Dates Funds Required:  | Can you provide financial statements if asked? |
| If a fundraising event, what cause does the proceeds   | benefit?                                       |

| 1. Please provide a brief description of your event/program/activity.  |
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| 2. Information about your event/program/activity.  |
| Is this the first year for your event/program/activity?   Yes  No  If no, how many years has this event/program/activity been happening?   |
| Is this the first time you have asked for funding from Wellington North for this event? $\square$ Yes $\square$ No If no, how many years have you received funding for this event/project? |
| Do you receive funding from any other sources, such as community groups or other forms of government? Please include in-kind support.  |
| How many attendees/participants do you anticipate?   |
| If a Special Activity, please provide some metrics your organization will use to determine the success of the activity:  |

| 3. What benefits will your event/program/activity bring to Wellington North and its residents? Please list a maximum of three (3) benefits.  |
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| 4. How has the community been engaged in the planning of your event/program/activity?  |
| 5. How do you intend to promote your event/program/activity, and recognize the Township of Wellington North's contribution to your event/program/activity if your application is successful? |
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| 6. Please use this space to include any additi event/program/activity.   | ional information you would like to provide about your   |
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|  | Frants and Donations Program declaring all the ect, and acknowledge that the Township of Wellington he information provided.   |
| Signature:   | Title:   |
| Printed Name of Signatory:   | Date:  |
| eligibility of an applicant to receive a Council<br>the Freedom of Information and Protection of<br>information may be directed to the Municipal<br>Office, 7490 Sideroad 7 West, Kenilworth<br>program and reserves the right to use appro-<br>programming including using photographs an | form is being collected for the purpose of determining grant. The information collected under the authority of Privacy Act. Questions regarding the collection of this al Clerk at 519-848-3620, ext.4227 or at the Municipal y, ON NOG 2E0. Wellington North may promote the oved and funded projects as examples in promotional and descriptions of the project in promotional materials. Ship of Wellington North Attention Clerk's Department. |
| Date Received by Staff:  |  |
| Signature of Staff:  |  |
| To request an alternate format of this docume  | ent, please contact township@wellington-north.com or   |

519-848-3620.