

Township of Horton

Attachment 'A'

Application for a Donation from Township of Horton

A. APPLICATION INFORMATION

1. Name of organization/individual: _____
Incorporation number: _____
Affiliated with a larger organization. If yes please provide name

2. Mailing Address:

Town: _____ Postal Code: _____ Phone: _____
3. Contact Person(s):
Name: _____ Name: _____
Title: _____ Title: _____
Address: _____ Address: _____
Phone: _____ Phone: _____
4. List of Executive of organization:
President _____ Vice President _____
Secretary _____ Treasurer _____

B. GRANT CATEGORY

1. Category of grant are you applying for:
Program Development Travel Festivals Annual Sponsorship
(Note: If you are applying under the travel category, please attach a list of participant's names and home addresses at the time of application. Substitutions will be permitted providing an 80% citizenship level is maintained.)
2. Amount requested: _____
3. Are you requesting funds from other sources: Yes _____ No _____
Explain if answer is yes:

C. PROJECT INFORMATION

1. What is the purpose of your grant request? Describe the event - time, place, participants. If more space is required, please attach a separate sheet.

2. If your program is not new, in what way is your project an enhancement to your present program, and how will it increase participation?

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3. How many Township residents will actively participate? _____
4. How many tourists do you anticipate attracting to this event? _____
5. How many people will be non-participants, spectators? _____

D. PROJECT BENEFITS

1. Is this a onetime only request? Yes _____ No _____
Explain if answer is no:

2. Will there be a charge to participants? Yes _____ No _____
Comments: _____
3. If your group/project is anticipating a profit, describe how these funds will be used.

4. What area does the activity serve? _____
5. Whom does your project or activity serve? _____

E. PROJECT BUDGET

Please attach a budget which clearly outlines the project revenues and expenditures of your project/event.

STATEMENT BY APPLICANT: On behalf of and with authority of the organization,

I certify that the information provided on this application for a grant is true, correct and complete, and that the organization agrees to abide by the program guidelines. I/we hereby agree to provide the Town of Perth with a post-project report upon successful completion of the project.

Signature of official signing officer _____ Date _____

The legal authority for the collection of this information is the Municipal Act of Ontario. The Township of Horton uses this information for the purpose of carrying out its responsibilities under the Act.

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POST PROJECT REPORT

(To be completed and returned within sixty (60) days after your event. Failure to return this form will result in the refusal of future grants to your organization)

Applicant: _____

Amount Received: \$_____ Purpose of Grant: _____

Final Statement of Operations (enclose with report) If your final statement indicates that a profit was achieved, please describe how these funds will be utilized. If you applied for a travel grant, please attach a list of participant names and home addresses to your final report.

I certify that this report is a true statement of our project.

Name: _____ Signature: _____ Date: _____
(Please Print)

PLEASE RETURN THIS FORM TO: Township of Horton
2253 Johnston Rd
RENFREW ON
K7V 3Z8