



GRANT IN AID APPLICATION For Non-Profit Organizations

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Application Deadline: October 31, 2018 year for the 2019 taxation year.

The following information must be provided each year to Municipal Hall by the application deadline for Council's consideration.

APPLICATION DATE: _____

AMOUNT APPLYING FOR \$ _____ OR

RENTAL FEE WAIVER REQUESTED \$ _____ FOR THE USE OF _____

EVENT: _____

FULL NAME OF ORGANIZATION: _____

CIVIC ADDRESS: _____

CONTACT DETAILS: CONTACT PERSON: _____

MAILING ADDRESS: _____

PHONE NUMBER(S): _____

EMAIL: _____

DATE ORGANIZATION ESTABLISHED IN SUMMERLAND: _____

REGISTERED NON-PROFIT SOCIETY OR CHARITY NUMBER: _____

1. Did your organization receive a grant in aid from the District of Summerland last year?

No _____ Yes _____ Amount \$ _____

2. Are you currently receiving benefit from a Property Tax Exemption? Yes _____ No _____

3. Do you receive use of municipal owned lands or facilities at a subsidized rate? Yes _____ No _____

If yes, details: _____

4. Describe your organization, its mandate and program(s): *Attach sheet if necessary.*

5. What are the community benefit(s)? (explain):

- a) Education: _____

- b) Environmental: _____

- c) Health: _____

- d) Youth/Senior/Special Needs: _____

- e) Cultural/Heritage: _____

- f) Recreational: _____

- g) Economic Development/Tourism: _____

- h) Other: _____

6. Describe the goals of the organization: _____

7. Number of paid employees: Full time _____ Part time _____ Volunteers _____ Members _____

8. Purpose for which grant will be used and breakdown of estimated expenses: *Attach sheet if necessary.*

9. Will any grant money received, be used be given to other organizations? No _____ Yes _____

10. What efforts have been made to raise funds?

11. Have you applied for other grants? No _____

Yes _____ If yes, please list year, purpose of grant amount and from whom.

| Date Applied | Applied to | Purpose | Amount | Received |
|--------------|------------|---------|--------|----------|
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12. In the event that your association or society is dissolved, what happens to the assets of your organization? _____

13. What is your plan to become financially self-supporting? *Attach sheet if necessary.*

Please advise any other relevant information:

I have read the District of Summerland's Grant in Aid criteria and the information contained in this application is complete and correct. I understand that all required information must be attached to this application to be considered and additional information may be required. I understand it is my responsibility to contact the District of Summerland if any changes occur with respect to ownership or principal use of the property.

Enclosed:

- Copy of Society Act or Charity Registration;
- Copy of most current Audited Financial Statements;
- Financial budget for the next year;
- List of current Directors/Officers.

Name: _____

Signature: _____

Position: _____

Date: _____