

## Council Grant Application

*Note: Applications to the Municipality of Middlesex Centre for Grant Funding will be accepted no later than November 30th each year.*

Organization name \_\_\_\_\_

Organization address \_\_\_\_\_

Contact Person \_\_\_\_\_  
*Must have signing authority* Position

Telephone number(s) \_\_\_\_\_

Fax \_\_\_\_\_ email address \_\_\_\_\_

Name of Proposal \_\_\_\_\_

Date of Proposed Event \_\_\_\_\_ Location \_\_\_\_\_

Signature of Contact Person \_\_\_\_\_

Please indicate the support being requested

Financial Assistance

Service or Project

Waiving of Facility Fees (Fee Reduction Request Application must be completed)

Staff Support

Supply of Equipment or Materials

Insurance Coverage

Use of Municipal Property or Facilities

Other (describe) \_\_\_\_\_

**FUNDING AMOUNT REQUESTED: \$** \_\_\_\_\_

**IN KIND AMOUNT REQUESTED: \$** \_\_\_\_\_

## Organization Mandate

Please provide your organizations purpose/mandate.

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## Details of Request for Assistance

If this application includes any assistance **other than direct financial assistance**, please outline the details of this request (e.g., type and estimated hours of staff support, facilities to be used, date of facility request, equipment requested, etc.). Acceptance of this application does guarantee other non-direct financial assistance, the fee reduction request application form must be completed and provided to Community Services.

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## Proposal Summary

Please provide a clear and concise summary of your proposal, including the goals and objectives of your proposal.

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Please check on category that best suits your request for assistance. Refer to the Council Grants Policy for category definitions.

- Tourism/Economic
- Community
- The Arts
- Culture and Heritage
- Environmental Awareness/Sustainability
- Other (describe) \_\_\_\_\_

**Note:** organizers of parades are required to provide liability insurance in the amount of \$2 million naming the Municipality of Middlesex Centre as additional insured. The cost of obtaining such insurance may form part of any assistance application, along with the necessary Municipal Staff support.

### Community Support

Please describe how your proposal supports the Municipality of Middlesex Centre.

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Do volunteers participate in your organization? If yes, indicate the number of volunteers and type of involvement.

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### Eligibility

1. Are you a non-profit organization?

- Yes
- No

2. Please provide your Revenue Canada Charitable Registration Number (if applicable)

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3. Is your organization located within the Municipality of Middlesex Centre?

- Yes
- No

Where? 

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4. Will this proposal provide services to the citizens of the Municipality of Middlesex Centre?

- Yes
- No

5. Has your organization made any other application to the Municipality of Middlesex Centre for financial assistance during the current year?  
 Yes            When? \_\_\_\_\_  
 No
  
6. Has your organization received funding assistance from the Municipality of Middlesex Centre in prior years?  
 Yes            When? \_\_\_\_\_ Amount \$ \_\_\_\_\_  
 No
  
7. Will your organization or another organization be the primary funder of this proposal?  
 Yes, our organization  
 Yes, another organization (please name) \_\_\_\_\_  
 No
  
8. Will the assistance that the Municipality provides your organization be utilized **only** by your organization?  
 Yes  
 No            Name other organization(s) \_\_\_\_\_  
\_\_\_\_\_

**Other Pertinent Information**

You are welcome to use the space below to provide any pertinent details about your proposal not covered in the preceding questions.

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Completed applications must be delivered by November 30<sup>th</sup> to:

Middlesex Centre  
10227 Ilderton Road  
Ilderton, Ontario  
N0M 2A0

or by email to:  
[farrell@middlesexcentre.ca](mailto:farrell@middlesexcentre.ca)

**Please note that a grant in any year is not considered to be a commitment by Middlesex Centre to continue such assistance in future years. It is not the intent of this grant program to become an annual component of an organizations budget plan.**

**Thank you for your submission.**