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				
Telephone number(s)				
Fax email address				
Name of Proposal				
Date of Proposed Event Location				
Signature of Contact Person				
 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.				
·				
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.				
Proposal Summary				
Please provide a clear and concise summary of your proposal, including the goals and objectives of your proposal.				
Please check on category that best suits your request for assistance. Refer to the Counci				
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.

Со	Community Support				
Ple	Please describe how your proposal supports the Municipality of Middlesex Centre.				
	volunteers participate in your organization? If yes, indicate the number of volunteers and e of involvement.				
Eli	gibility				
1.	Are you a non-profit organization? □ Yes □ No				
2.	Please provide your Revenue Canada Charitable Registration Number (if applicable)				
3.	Is your organization located within the Municipality of Middlesex Centre? ☐ Yes ☐ No Where?				
4.	Will this proposal provide services to the citizens of the Municipality of Middlesex Centre? ☐ Yes ☐ No				

5.		nization made any other application to the Municipality of Middlesex Centre sistance during the current year? When?
6.	Has your orga	
	□ Yes □ No	When?Amount \$
7.	☐ Yes, our orç	nization or another organization be the primary funder of this proposal? anization r organization (please name)
	□ No	
8.	Will the assista organization? □ Yes	nce that the Municipality provides your organization be utilized only by your
	□ No	Name other organization(s)
		o use the space below to provide any pertinent details about your proposal preceding questions.
Co	mpleted applica	tions must be delivered by November 30 th to:
102 Ilde	Idlesex Centre 227 Ilderton Roa erton, Ontario M 2A0	nd
	oy email to: oran@middlese	<u>ccentre.ca</u>

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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.