



GEORGINA

COMMUNITY INITIATIVES FUND

Individual/Community Group/Organization Grant Application Form

Background:

The Town of Georgina is committed to assisting local individuals, community groups and organizations with their fundraising needs. To support this commitment, the Town has established a “Georgina Community Initiatives Fund”, which is funded through the Annual Mayor’s Charity Golf Classic.

Purpose:

The purpose of the Georgina Community Initiatives Fund is to assist with local community fundraising efforts to assist with the needs of people in our community resulting from various circumstances.

Grant Application Process:

Grant criteria has been established to evaluate requests submitted in an equitable and efficient manner. As funds may be limited, priority will be given to individuals or groups based on information received and reviewed in the application process.

Applicants may apply once per calendar year for funding consideration.

Maximum amount of each funding request is \$1,000 and approval is at the discretion and approval of the Working Committee.

Please submit a completed application form to the: Town of Georgina Mayor’s Office, Civic Centre, 26557 Civic Centre Road, R.R.#2, Keswick, ON, L4P 3G1, Attention: Tammi Roberts or by e-mail to troberts@georgina.ca.

All groups applying for a grant must provide a completed grant application.

The Working Committee will review all applications and their decision will be final.

Eligibility Criteria – Please read carefully:

While the criteria and application forms have been developed as guidelines, special circumstances will be considered on an individual basis.

1. Applicants for the Georgina Community Initiatives Fund must be residents of or have a vested interest in the Town of Georgina.
2. This fund will support community groups, enhancing the community and providing community based activities for the overall betterment of the community in the Town of Georgina.
3. The applicant must provide a detailed outline of the activity and details of costing to provide the activity. Details should include location, date and length of activity, how this will be marketed to residents of Georgina, the expected attendance, the benefit to the community and how many volunteers/paid staff will be involved.
4. Funding assistance may be requested for various components of the fundraiser being planned (i.e. costs for Town or other facility rental, permit fees, etc.) Once an application is approved, payment will be made directly to the organization/vendor that provided an invoice. *N.B. Applications for costs associated with liquor or any type of alcohol or licence to provide such are prohibited.
5. Should the event or purpose for which the funding is provided change (i.e. the event is cancelled) the full funding amount is to be payable to the Town of Georgina directly – Attention: Georgina Community Initiatives Fund.

*These criteria and application forms have been developed as guidelines. Unique circumstances will be considered by the Working Committee.

Personal information is protected under the Municipal Freedom of Information and Protection Act, 2001. Personal information is collected pursuant to the Municipal Act, R.S.O. 1990, and will be used for the purpose of financial assistance. All information is confidential and may be stored electronically for municipal use only. Inquiries may be directed to the Office of the Mayor.

Community Group/Organization Fund Application Form

Name of Group/Organization	
Name of Person Applying	
Position with Group/Organization	
Address (Proof of address required)	
Phone # & E-mail	

Please provide in detail the activity/event in which you are seeking funding for:

Name of Event: _____

Purpose of Event/Proceeds Going To: _____

Location: _____

Date / Time: _____

Annual Event: Yes: _____ No: _____ Expected Attendance: _____

Expected Audience: Adults: _____ Family/Children (ages) _____

Please provide an itemized list of what the funding will be used for (i.e. facility rental, permits, etc.):

Proposed Use of Funds	Date	Details	\$\$ Requested
		TOTAL REQUESTED:	\$

****An invoice or quote must accompany each activity.****

Reason for application – please explain in detail.

Please attach any letter or reference or endorsements relevant to this application.

Did you receive or will you receive funding from any other organizations, groups, agencies or levels of government? If yes, please disclose from whom and how much was or will be received:

To your knowledge, has this group or organization listed above received this funding previously?

Yes: _____ No: _____

If yes, when was the funding paid out? _____ \$ _____
Year Amount Received

Upon approval of this funding request, the applicant agrees to provide an evaluation of the success of the event to the Working Committee within one month after the conclusion of said event.

Dated this _____ Day of _____, _____
(Month) (Year)

Signature of Applicant