



VILLAGE OF DUCHESS



Recreation Grant Application Form

Organization Information

Organization: _____ Date: _____

Mailing Address: _____
Street Address

City Province Postal Code

Phone: _____ Email _____

Describe Your Organization and It's Purpose

Project or Event Information

Project/Program/Event Title: _____

Please Provide a brief summary: **(Include Pictures and Quotes Etc.)**

Please Provide a Statement of Need for your Project/Program or Event

Location of Project/Program or Event: _____

Project Start Date: _____ Project End Date: _____

Target Audience: _____ Anticipated Number of Users: _____

Does your Organization have reserve funds available: _____

Are The Reserve Funds Committed to this project or to another please confirm: _____

Involvement

How will your organization advertise the involvement of the Village and County? _____

Feedback

If applicable, how will you collect feedback from your participants: _____

Funding

Please indicate the amount your organization is requesting: _____

Has your Organization requested additional funding from other sources? _____

Please Attach a copy of your Organizations budget for this project

Please Attach a Current Financial Statement for your Organization

Primary Contact

Name: _____ Position: _____

Mailing Address: _____

Street Address

City

Province

Postal Code

Phone: _____ Email _____

Secondary Contact

Name: _____ Position: _____

Mailing Address: _____

Street Address

City

Province

Postal Code

Phone: _____ Email _____

Signature

Signature: _____ Date: _____