



# **YOUTH AND COMMUNITY INITIATIVES FUND**

## **Community Group /Organization Grant Application Form**

### **Background**

The Town of East Gwillimbury is committed to helping youth (under age 19), elite athletes and community groups of the Town to participate in various activities and community programs.

To support this commitment, the Town has established a “Youth and Community Initiatives Fund”, which is funded through the Mayor & Council Charity Golf Tournament held annually in September.

### **Purpose**

The purpose of the Youth and Community Initiatives Fund is to provide financial assistance to both individuals and community groups to help them participate in or organize various activities offered throughout the Town.

### **Grant Application Process**

Grant criteria have 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 can apply once per calendar year for funding consideration.

Maximum amount of each funding request is \$5,000 and approval is at the discretion and approval of the Application Review Team.

Please submit a completed application form to the: Office of the Mayor and Members of Council, Town of East Gwillimbury, 19000 Leslie Street, Sharon, ON, L0G 1V0 Attention: Gina Casey or by email to [gcasey@eastgwillimbury.ca](mailto:gcasey@eastgwillimbury.ca) or 905-478-4282 ext 1276.

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

The Application Review Team 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 Youth and Community Initiatives Fund of East Gwillimbury must be a not for profit East Gwillimbury community group and/or a charitable non-profit organization.
2. Groups should be available to volunteer for the Town of East Gwillimbury at the discretion of Application Review Team.
3. This fund will support community groups, enhancing the community and providing community based activities enhancing the community and provided at no cost to the participants or attendees.
4. 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 East Gwillimbury, expected attendance, the benefit to the community and how many volunteers/paid staff will be involved.

Once an application is approved, payment will be made directly to the organization/vendor that provided an invoice.

5. Should the event or purpose for which the funding is provided change (ie. the event is cancelled) the full funding amount is to be reimbursed to the Town of East Gwillimbury directly – attention the Youth and Community Initiatives Fund.

These criteria and application forms have been developed as guidelines. Unique circumstances will be considered by the Application Review Team.

## Community Group/Organization Fund Application Form

Name of Group/Organization	
Name of Person Applying	
Position with Group/Organization	
Address (proof of address required)	
Charitable Organization Registration Number	
Phone & E-Mail	

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

Name of Event: \_\_\_\_\_

Location: \_\_\_\_\_

Date / Time: \_\_\_\_\_

Annual Event: Yes  No:  Expected Attendance: \_\_\_\_\_

Expected Audience: Adults  Children (ages) \_\_\_\_\_ Family

**Please describe what the funding grant will be used for:**

Description of Event / Activity**	Date	Details	\$\$ Requested
		<b>TOTAL REQUESTED:</b>	<b>\$</b>

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

Reason for application – please explain in detail:

Please attach any letters of reference or endorsements relevant to this application.

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To your knowledge has this Group or Organization listed above received this grant before?

Yes

No

If yes, when was the grant paid out?

\_\_\_\_\_ \$ \_\_\_\_\_  
Year                      Amount Received

Indicate name of the supplier providing the service:

Example: Children’s Entertainer

Name and complete mailing address	Amount Requested and Invoice Attached



Did you receive or will you receive funding from any other organizations, groups or agencies?  
If Yes, from whom and how much was or will be receive?

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Who should we contact if we require volunteers for Town events?

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Please indicate days and time available to volunteer.

**Weekdays**

**Weekends**

Day  Evenings  Both

Day  Evenings  Both

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The applicant acknowledges that if a grant is provided, an evaluation of the success of the event will be required.

Dated this \_\_\_\_\_ Day of \_\_\_\_\_, \_\_\_\_\_  
(Month) (Year)

\_\_\_\_\_  
**Signature of Applicant**

*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.*