



VILLAGE OF KASLO & AREA D  
RECREATION GRANT FUNDING APPLICATION  
413 Fourth Street, PO Box 576, Kaslo, B.C. V0G 1M0

✓ <b>REQUIRED ELEMENTS</b>	
	Only one (1) application may be submitted per group
	Maximum application amount is Five Hundred Dollars (\$500)
	The most current financial statements <b>MUST</b> accompany this application.
	Activity must be conducted within the Village of Kaslo or Area D.
	Only recreation activities are eligible (see policy for definitions)
	All reporting on Recreation Grants awarded more than 6 months ago is complete

We are collecting your personal information under 26(c) of the Freedom of Information and Protection of Privacy Act for the purpose of managing the Recreation Grant Program. If you have questions about our collection of your information, please contact the Privacy Officer at [corporate@kaslo.ca](mailto:corporate@kaslo.ca) or call 250-353-2311 x105.

<b>ORGANIZATION INFORMATION</b>	
Name of Organization	
Mailing Address	
President	
Vice President	
Secretary	
Treasurer	

<b>CONTACT INFORMATION</b>	
Contact Person Name	
Contact Person Email	
Contact Person Phone	

Amount of Recreation Grant funding requested:			
<b>DESCRIBE YOUR PROJECT</b> – Tell us who/when/what will be happening:			
<b>DESCRIBE YOUR NEED</b> – Explain your group’s need for funding:			
<b>PROJECT LOCATION</b> – Describe where the activities will take place:			
<b>PROJECT BUDGET</b> – List all sources of revenue and all expenses or attach a separate page with this information:			
Revenue		Expense	
Source	Amount	Description	Amount
Total Revenue		Total Expense	

<p><b>USE OF GRANT FUNDS</b> – Describe how grant funds will be spent (see the Recreation Grant Policy for information about eligible expenses)</p>
<p><b>WHO WILL BENEFIT</b> – Tell us about the targeted participants and/or audience.</p>
<p><b>ACCESSIBILITY</b> – What measures, if any, are in place to make the project activities accessible to all?</p>

By signing below I confirm that the above information is correct, to the best of my knowledge, and that I have the authority to submit this application on behalf of the group:

Signature \_\_\_\_\_  
Printed Name \_\_\_\_\_  
Date \_\_\_\_\_