FIN-71-024 EVENT GRANT PROGRAM

APPLICATION FORM

Directions for completing the grant application:

- Read the Event Grant Program Guidelines.
- Answer all questions on the form.
- Include all required documents.
- Return completed applications to:

  Lac La Biche County Event Sponsorship Program
  Box 1679
  Lac La Biche, AB T0A 2C0

  or by email at grants@laclabichecounty.com

- For information on completing this application visit our website at www.laclabichecounty.com
- For questions, contact Sue Welke, Grants and Community Development Officer at 780-623-6816 or by email at grants@laclabichecounty.com.

Organization Information

1. Incorporated Legal Name of Organization (must match your provincial incorporation name):
2. Act your group is registered under (e.g. Societies Act, Agricultural Societies Act):
3. Location of Organization's Facilities:
4. Organization Phone Number:
5. Organization Email:

Applicant Contact Information

Primary Contact Person

6. Contact Person:	
7. Contact Email:	
8. Contact Phone:	9. Primary Contact Phone (cell):

Secondary Contact Person:

10. Contact Person:
11. Contact Email:

12. Contact Phone:	13. Primary Contact Phone (cell):

Event Eligibility Checklist

Does your Event:	(Yes/No)
1. Take place in Lac La Biche County?	
2. Is the event substantially different from those activities which are normally offered by your organization's regular services and programming?	
3. Is the event open to the public?	
4. Is your event political or religious in nature?	
5. Is the event already substantially supported by the County?	
6. Is the event supported locally (from organizations in Lac La Biche County) in its planning and delivery?	

Event Description

7. What is the title of your event?

8. When and where will the event be held?

Date	Time (e.g. 10am-5pm)	Location (Facility/address)

9. Please provide a description of your event including major activities and features of your event.

10. Please explain how your event supports one or more of the following outcomes. Be as descriptive as possible: Economic Development, Recreation and Culture, Social Wellness, Tourism, the Environment.

11. What area will your event draw participants from (e.g. locally, regionally, provincially, nationally, internationally). Please specify how the event has been advertised and promoted to potential attendees in these areas.
12. Who is your target audience (e.g. seniors, families, motor sport hobbyists, etc.)
13. If your have identified your event as a regional, provincial, national or international event, please explain how this event promotes tourism to Lac La Biche County.
14. How many participants will your event have? How have you estimated this number? (Don't include event organizers, staff, volunteers, and vendors and associated staff)
15. Please identify other organizations which are partnering with your organization for this event.
16. Will your event charge an entry fee? If yes, how much?
17. How will you acknowledge Lac La Biche County's financial contribution to your event?
18. Does your organization intend to hire or purchase goods and services from persons who are, or are related to members of your board or their employees? If yes, what steps will your organization take to ensure it is procuring goods and services in a fair and transparent manner?

Submission Attachment checklist

Required Attachments

1.	Event Budget (using the provided budget template)
2.	Organization's most recent financial statements (if not previously provided)
3.	List of the organization's officers and directors, and their contact information
4.	Board Approved Motion Supporting the Application

Other Additional Information that may be Requested

1.	Event Schedule
2.	Proof of Insurance
3.	Other relevant Information

Event Grant Program

Application Certification

I Certify that:

1. I certify that the information contained in the application and supporting documents is true and accurate.

2. I certify that required attachments are true copies and have been included with the application, or have been previously provided. The required attachments form part of this application.

3. I certify that am duly authorized on behalf of the applicant organization to submit this application, and that the organization is in support of this application.

4. I acknowledge that the submission of an application alone does not guarantee funding, and that the provision of funding is dependant upon a review and approval process.

5. I have read the Event Grant Program Guidelines and understand that any approved funding will be subject to these guidelines, unless otherwise stated.

6. I acknowledge that, should funding be approved, the organization will be required to enter into a grant funding agreement with Lac La Biche County.

Organization Name	
Signature of Authorized Representative	
Name of Authorized Representative	
Title of Authorized Representative	
Phone Number	
Email	

Please keep a copy of this application for your records

POPA Statement

The personal information that you provide to Lac La Biche County is being collected under the authority of Alberta's Protection of Privacy Act (POPA), Section 4(c). The information will be used for the purpose of administering the County's grant funding programs. For questions about the collection, use and disclosure of personal information, please contact the Access to Information and Protection of Privacy Act Coordinator at 780-623-1747.