

Schedule A: FESTIVALS AND EVENTS GRANT APPLICATION

Instructions:

- Use this cover sheet as the first page of your application.
- Please submit all documents from the application checklist.
- Incomplete submissions may delay or disqualify your request for funding.
- Please apply at least two (2) months prior to required date.
- If you do not have enough space to answer a question, please attach a separate sheet.
- The policy governing the District of Carleton North's grants program is available on the Town's website at www.carletonnorth.ca/policies or by contacting the Town at (506) 392-6763.
- Please forward completed application to:

District of Carleton North
 Attn: Chief Administrative Officer
 19 Station Road
 Florenceville-Bristol, NB E7L 4L7
 Email: amy.mcintosh@carletonnorth.com
 Fax: 506-392-5211

APPLICATION CHECKLIST

- Your District of Carleton North **Festivals and Events Grant Application** delivered in person, mailed, emailed or faxed.
- A **cover letter**, if you would like to provide additional information about your organization and its goals/objectives. Please do not include bound materials, promotional materials or reports. If additional information is required, you will be contacted during the review process.
- Two letters of support** or testimonials are recommended but not required.
- The **budget for the event or festival**. (See Part D)

PART A - APPLICANT INFORMATION

Community group/Organization/Business (applicant):

Title of project:

Contact name:

Title:

Mailing address:

Telephone:

Fax:

Email:

Federal Charitable Status Number (if applicable):

PART B-APPLICANT MANDATE

1. Please briefly describe your organization's mandate/objectives.

2. Please describe the community, area and/or group(s) your organization serves.

PART C-ORGANIZATION/PROJECT/SERVICE INFORMATION

3. Please describe your organization’s festival or event requiring support from District of Carleton North Town Council.

4. Please describe the benefits your festival or event will provide to the District of Carleton North.

5. List contributions that your organization will provide to this festival or event including use of own staff, services facilities and equipment. Please include the number of participating volunteers and describe their roles.

PART D-ORGANIZATION/PROJECT/SERVICE BUDGET

Festival or Event Name:

PLANNED EXPENDITURES

(Itemize and list all costs related to your festival or event)

| | AMOUNT |
|-----------------------------------|---------------|
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| TOTAL PLANNED EXPENDITURES | |

| ANTICIPATED REVENUE <i>(Itemize and list all revenue sources for your project, program or service)</i> | AMOUNT | |
|--|------------------|------------------|
| | Requested | Confirmed |
| Federal government support | | |
| Name of fund: | | |
| Provincial government support | | |
| Name of fund: | | |
| Municipal government support | | |
| District of Carleton North <i>(include amount requested in this application)</i> | | |
| Other municipal governments | | |
| Specify municipalities: | | |
| Donations/Fundraising | | |
| | | |
| | | |
| Other (please specify) | | |
| | | |
| | | |
| TOTAL ANTICIPATED REVENUE | | |

| FUNDING/SUPPORT REQUESTED FROM THE DISTRICT OF CARLETON NORTH <i>(Please check the type of grant you are applying for and indicate the amount requested)</i> | AMOUNT REQUESTED |
|--|-------------------------|
| <input type="checkbox"/> Festival and Event Grant funding | \$ |
| <input type="checkbox"/> In-Kind donation requested. Itemize all in-kind donations being requested (number of tables, chairs, labour, use of each,...) | |

DECLARATION

The information provided on this application form and accompanying documentation is accurate to the best of my knowledge. I hereby give the District of Carleton North authority to verify any and all information pertaining to this application.

Application prepared by:

_____ _____ _____
Signature *Print Name* *Date*

District of Carleton North approval:

Application approved for: \$ _____

To the following organization: _____

Application denied

_____ _____
Chief Administrative Officer *Date*