

The Town of Crossfield has operational grant funding available to local non-profit community organizations who are registered under the Alberta Societies Act operating a district amenity offering programs and/or services. Grant funding must be used for facilities, programs and/or services which provide recreational or cultural functions that are open for the use and enjoyment of Town of Crossfield.

Application Deadlines

Spring Funding: March 1, 4:30 pm Fall Funding: October 1, 4:30 pm

This grant may be used for general operational expenses such as:

- · Insurance costs
- Utilities expenses
- Maintenance expenses
- Sports and recreation programs
- Small capital funding (renovation or construction) requests under \$5,000 (over \$5000.00 requires the Capital Funding application form)

Please note funding cannot be provided for items or projects that have already been purchased or paid for.

Current and proposed operating budgets, audited financial statements, and a complete list of board members must be attached to this application package. If the organization has received funding previously, a Project Completion Report must be completed for the previous funding in order for a new application to be considered.

Submitted applications will be reviewed by the Administration Liaison and forwarded to the Crossfield Recreation Board. Upon review, recommendations from the Board will be forwarded to Town of Crossfield Council for consideration and voting

It is the responsibility of the applicants to submit a complete application with clear and sufficient information. Incomplete applications will not proceed past the screening process.

It should be noted that the grant process is competitive - applicants should submit clear, concise, and complete applications. Submission of an application does not guarantee the applicant will be awarded all or part of the grant requested. Incomplete or unclear applications may be declined.

I have read and agree to the terms of this application *

Yes

Operational Funding Application

Crossfield Recreation Board

Contact Information



Organization Name *
Organization Website
Organization Society Registered Under
ie: Society's Act, Agriculture Society's Act, etc.
Registered Society Number *
Organization Address *
Mailing Address
City Province
Postal
Primary Contact *
First Name Last Name
E-Mail Address *
example@example.com
Phone Number *



Please enter a valid phone number.

Alternate Contact *
First Name Last Name
Phone Number *
Please enter a valid phone number.
E-Mail Address *
xample@example.com
Total Amount of Funding Requested *
f applicable, when did your organization last received funding from the Crossfield Recreation Board?
f you have received funding from the Crossfield Recreation Board in the past, has your organization submitted a Project Completion Form for its most recent project?
Yes
s your facility/program receiving anyfinancial assistance from other agencies? * Yes No
f you answered yes to the above question, please explain



Please give us a brief description of your organization *

Please describe what these funds will be used for *

Describe how the project will benefit your community *

Please indicate the number of people who access your facility, amenity or program for which funding is being sought who reside in:

Number of participants

Town of Crossfield

Rocky View County

Other Municipality

What months are your organization/facility active? *

January

February

March

April

May

June

July

August

September

October



Budget

An answer is required for each box below. Please use "0" in boxes that do not apply.

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Balance

Chequing

Savings

GIC

AGLC/Casino

Other

Total

Please specify any additional accounts below

EXPENSES

Current Year Budget

Previous Year Actual

2 Years Previous Actual

Salaries, wages, and benefits

Operating and maintenance

expenses

Materials, good and supplies

Utility costs

Other (please specify below)

Other (please specify below)
Other (please specify below)
Total Expenses

Please briefly specify 'Other'

Registrations/Memberships Grants Donations Other (please specify below) Other (please specify below) Please briefly specify 'Other' Current Year Budget Previous Year Actual 2 Years Previous Actual 2 Years Previous Actual 2 Years Previous Actual 2 Years Previous Actual 3 Years Previous Actual 3 Years Previous Actual 4 Years Previous Actual 4 Years Previous Actual 5 Years Previous Actual 5 Years Previous Actual 6 Years Previous Actual 6 Years Previous Actual 7 Years Previous Actual

Supporting Documents

The following documents must be submitted for your application to be considered complete



Current audited financial statement
List of board members
Society Bylaws
Other documents required for further clarification, as requested

Declaration Statement

Please note: this application must be signed by the president and/or a director and who has signing authority for the organization.



Your personal information is being collected under the authority of section 4(c) of the Protection of Privacy Act (POPA) and is managed in accordance with the provisions of that Act. This information may be used and disclosed to external service providers for purposes related to registration, administration, and program billing. If you have any questions about the collection, use, or disclosure of your personal information, please contact the Town of Crossfield at 403-946-5565.

Obligations Upon Receiving Funding

Grant recipients will receive a Grant Letter outlining the approved grant amount, including specific items approved or denied. Organizations may only spend grant funds on the specific items approved. Upon completion of the project, recipients must submit a Project Completion Report detailing how the money was spent and whether or not the stated objectives were achieved. Failure to submit a report may affect future grant application consideration. At any time, grant recipients must permit a representative of the Town of Crossfield to examine records to determine whether the grant funding has been used as intended and approved.

