



Grant Request Application Form

Date: _____

Society Number: _____

Information Required about the Applicants:

| | | | |
|----------------------------|--|----------------------------|--|
| Name of Organization: | | Electoral Area Served: | |
| Contact Person: | | Alternate Contact: | |
| Position: | | Position: | |
| Mailing Address: | | Mailing Address: | |
| Postal Code: | | Postal Code: | |
| Telephone Number: (Wk/Res) | | Telephone Number: (Wk/Res) | |
| Fax number/Email: | | Fax Number/Email: | |

Legal Description of Property:

Executives of Organization

| | |
|---------------------------------|--|
| President: | |
| Vice President / Vice Chairman: | |
| Treasurer: | |

Information required about the proposed project - include a copy of the Society Resolution requesting this grant

Describe the Project for which your Organization is requesting a Grant:

| | |
|--|----|
| What is total cost of the Project: | \$ |
| What is the amount requested from the Regional District: | \$ |

Please include:

- a) Capital Project Budget, including all sources of funding
- b) Year-end financial statements including current Bank Balance; and
- c) Project budget

| | |
|-------------------------|-------|
| Signature of Applicant: | Date: |
|-------------------------|-------|

For Regional District Use only

| | |
|----------------------------|--------------------|
| Funding Source Fair Share: | BCR Grant-in-lieu: |
| Other: | Coding: |