



OPERATING GRANT APPLICATION FORM

DEADLINE: December 31st

APPLICANT INFORMATION

| | | | | |
|--|--|--------|--|--------------|
| ORGANIZATION NAME: | | | | |
| MAILING ADDRESS: | | | | |
| TOWN: | | PROV.: | | POSTAL CODE: |
| PRIMARY CONTACT NAMES(S): | | | | |
| PHONE: | | | | |
| EMAIL/FAX: | | | | |
| NAME & LOCATION OF FACILITY (if applicable): | | | | |

SIGNATURE OF AUTHORIZED REPRESENTATIVE: _____

DATE: _____

TYPE OF GRANT

Check all that apply

- | | |
|--|---|
| <input type="checkbox"/> COMMUNITY HALL BOARDS GRANT | <input type="checkbox"/> SENIORS TRANSPORTATION GRANT |
| <input type="checkbox"/> MUSEUM GRANT | <input type="checkbox"/> HAMLET RECREATION GRANT |

DOCUMENTATION

Please attach copies of the following documents and information to your application

- | | |
|---|--------------|
| <input type="checkbox"/> MOST RECENT FINANCIAL STATEMENT <i>(incl. 2 executive officer signatures)</i> | DATED: _____ |
| <input type="checkbox"/> MINUTES OF MOST RECENT ANNUAL GENERAL MEETING | DATED: _____ |
| <input type="checkbox"/> CURRENT YEAR ASSOCIATION BUDGET | DATED: _____ |
| <input type="checkbox"/> LIST OF EXECUTIVE OFFICERS | |
| <input type="checkbox"/> ANNUAL RETURN FOR SOCIETY – Proof of Filing | DATED: _____ |

Corporate Access No.: _____

TERMS & CONDITIONS

1. The Operating Grant application deadline is **December 31** of the year of application. Applications must be submitted in full *prior to* the deadline.
2. Operating Grant funding will not be carried forward and no retroactive payments will be made.
3. All applications are reviewed on an individual basis by County Council and decisions regarding approval are made solely by County Council. Operating grant funding is pre-approved by Council during annual budgetary deliberations. However, grant applications must be submitted prior to the remittance of any funds.
4. The County may request a brief annual report on the organizational use of funds for large grants.
5. The County will not pay for GST; please omit GST from your application form.
6. Applications can be submitted in person, by mail, fax or email to:

Attn: Grants Officer
Big Lakes County
Box 239, High Prairie, AB T0G 1E0
Phone: (780) 523-5955
Fax: (780) 523-4227
Email: grants@biglakescounty.ca

Big Lakes County proudly offers grants to community non-profit organizations to assist in funding valued projects throughout the County. Contact us today. We are eager to serve you!

FOR ADMINISTRATION USE ONLY:

DATE RECEIVED: _____

DATE REVIEWED: _____

FUNDING APPROVED: YES NO

AMOUNT APPROVED FOR: \$_____

DEPARTMENT: _____

COUNCIL MOTION: #_____

COMMENTS: _____
