

Appendix B - Community Grant Tier 1 Application Form

Maximum Request: \$1,000

Name of the Organization:			
Applicant Name and Title of Representative			
Civic Address:			
Contact Number:		Email:	
Form of Organization:	<input type="checkbox"/> Not-for-Profit Organization		
	<input type="checkbox"/> Charitable Organization		
Registry of Joint Stocks file number or Charitable Organization number:			
<i>If you are neither a not-for-profit nor a charitable organization and are being sponsored by an eligible host organization, please provide the host organization's information and contact details below. <u>Please note that the Municipality will pay the approved grant funds to the host organization.</u></i>			
Host Contact Information			
Host Organization:			
Applicant Name and Title of Representative:			
Civic Address:			
Contact Number:		Email:	
Host Form of Organization:	<input type="checkbox"/> Not-for-Profit Organization		
	<input type="checkbox"/> Charitable Organization		
Host's Registry of Joint Stocks file number or Charitable Organization number:			
Sum Requested: \$			
Purpose of Funding Request: (Use additional pages if required.)			
Required Attachments	<input type="checkbox"/> Registry of Joint Stocks file number (include a list of directors), Charitable Organization number or proof of organizational status		

Please forward your applications to grants@richmondcounty.ca