



Canada's Tournament Capital

CITY OF KAMLOOPS
WINTER GAMES LEGACY FUND
GRANT APPLICATION GUIDELINES

Winter Games Legacy Fund Grants are to cover circumstances where a person or group advances beyond local competition or is recruited to a provincial or nationally ranked team.

- (1) Grants will be reviewed and paid on a quarterly basis.
- (2) Maximum of ONE grant per calendar year.
- (3) Qualifying events, if applicable, must have taken place within the previous three months.
- (4) Applicants/organizations must be **resident in Kamloops**.
- (5) The maximum amount allocated, **provided funds are available**, will be \$150 for individuals and \$300 for groups.
- (6) If funds are limited, priority may be given to youth applicants.

Please provide the following information:

- (a) proof of qualification to advanced level of competition;
- (b) completed application form;
- (c) detailed statement of income and expenses (proposed or actual) for attending this event (*on attached form*).

Please Note:

- ◆ Applications must be completed in a neat and legible manner.
- ◆ All applications deemed to be eligible will be reviewed by the Parks and Recreation Commission.
- ◆ Granting is subject to availability of funds from the Winter Games Legacy Fund Grant as provided in the City of Kamloops Annual Budget.
- ◆ Should the trip/event be cancelled or postponed, all funds allocated must be returned to the Fund (City of Kamloops).
- ◆ Any additional information which you feel will assist the Commission in the evaluation of your application may be attached.
- ◆ Signature of participant or an executive in the participating organization is required.

Please forward to:

Parks and Recreation Commission
c/o 910 McGill Road
Kamloops BC V2C 6N6
Attention: Parks, Recreation, and Cultural Services Department

PLEASE TYPE OR PRINT IN BLACK INK!



**CITY OF KAMLOOPS
WINTER GAMES LEGACY FUND**

GRANT APPLICATION

STATEMENT OF REVENUE AND EXPENSES

EXPENSES:

Travel	\$	_____	
Accommodation		_____	
Meals		_____	
Other (please itemize)		_____	
_____		_____	
_____		_____	
_____		_____	
TOTAL EXPENSES:	\$		_____

REVENUE:

Provincial Sport Government Body	\$	_____
Provincial Government		_____
Donations		_____
Fundraising		_____
Other (please itemize)		_____
_____		_____
_____		_____
_____		_____
TOTAL REVENUE:	\$	

Total Funding Assistance Requested: \$ _____

NOTE: It is to your advantage to provide as much detail as possible in your financial plan, regarding this application for funding assistance.

Previous funding assistance received:

Amount: \$ _____	Year 20 _____
Amount: \$ _____	Year 20 _____

To the best of my knowledge, the above statements are true as of this date.

Signed: _____
Applicant or Organization Executive Member



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WINTER GAMES LEGACY FUND

GRANT APPLICATION

Date of Application: _____

Name of Applicant: _____

Address: _____ Postal Code: _____

CONTACT PERSON(S):

(1) Name: _____ Position: _____

Phone: (Home) _____ (Business:) _____

(2) Name: _____ Position: _____

Phone: (Home) _____ (Business:) _____

GENERAL INFORMATION:

(1) Sport: _____

(2) Name of event/competition: _____

(3) Level of event: Provincial National International

(4) Date(s) of event(s): _____

(5) Location of event(s): _____

(6) Number of participants deriving direct benefit through this application: _____

(7) Qualification of events undertaken: **(The following information must be filled in)**

Event: _____ **Event:** _____

Date: _____ Date: _____

Finished in _____ place Finished in _____ place

Location: _____ Location: _____

(7) Total expected (or actual) expenses for this trip: \$ _____

(Submit Revenue and Expenditure form as supplied with application.)

(8) Funding applied for from other sources:

Name: _____ Amount: \$ _____

Name: _____ Amount: \$ _____

Name: _____ Amount: \$ _____

TOTAL: \$ _____

\$ _____

(9) Amount requested from Winter Games Legacy Fund Grant: Individual Team (please check one)

(10) Previous funding from Winter Games Legacy Fund Grant:

Amount: \$ _____ Year 20 _____

Amount: \$ _____ Year 20 _____

(11) To the best of my knowledge, the above statements are true as of the date of this application.

Signed: _____

Applicant or Organization Executive Member