APPLICANT INFORM	IATION
Legal Name of Applicant	
Societies Act Incorporation Number	
REGISTERED MAILING ADDRESS (All correspondence and cheques will be mailed to this address.	
GRANT APPLICATIO	N DETAILS
1. Name of Program/Event:	
2. Date of Program/Event:	
3. Anticipated number of Participa	ints:
4. Please provide a detailed description requested:	on of Initiative for which grant funding is



GRANT APPLICATION DETAILS CONTINUED

5. Please provide an explanation of how the project will benefit your community.
6. How will the Yellowhead County grant contribution be acknowledged?
7. If your financial statement includes savings of greater than \$25,000, explain how these funds can or cannot be allocated to this initiative.



PROGRAM/EVENT BUD	G E T
Project Revenue	
Yellowhead County Grant Request:	\$
	\$
	\$
	\$
Total Revenue:	\$
Project Expenditures (provide all estimate Expense:	es if applicable) \$
Expense:	\$
Expense:	\$
Expense:	\$
Expense:	\$
Expense:	\$
Total Expenditures:	\$



\$

Balance (Revenues minus Expenditures)

APPLICANT AGREEMENT

I declare that:

- 1. I am a duly authorized representative with legal and/or financial signing authority for the above organization.
- 2. The information contained in this application and supporting documents is true and accurate and endorsed by the above organization.
- 3. Any grant awarded shall be used solely for the purpose stated in this application and according to grant parameters unless otherwise agreed by Yellowhead County.
- 4. I have read and understood this declaration and the information contained in the grant application package.

Dated at		, Alberta, this	day of		, 20
Signature (of Chairperson		Pr	inted Name	
Email			Ph	one #	
Signature of Treasurer			Pri	inted Name	
Email			Ph	one#	

ATTACHMENT CHECKLIST

Current list of Executive and/or Board of Directors, including names, positions/titles, addresses, email and phone number(s)
Previous Year's annual financial statement (dated and signed)
Copy of most recent Annual Return filed with Alberta Registry.
·
Copy of liability insurance certificate (if not covered through Yellowhead
County master policy).



Return Completed Applications to:

Yellowhead County Recreation Program and/or Event Grant Application 2716 1st Avenue Edson, Alberta T7E 1N9 Email: dstarnes@yhcounty.ca