

Schedule C: IN-KIND GRANT APPLICATION

Instructions:

- Use this cover sheet as the first page of your application.
- The policy governing the Town of Florenceville-Bristol grants program is available on the Town's website at www.florencevillebristol.ca.ca or by contacting the Town at (506) 392-6013.
- Please forward complete application to the Chief Administrative Officer/Clerk at the Town of Florenceville-Bristol.
- Please apply at least one week prior to required date.

APPLICATION CHECKLIST

- ☐ A signed original of your **Town of Florenceville-Bristol In-Kind Grant Application**.
- ☐ A **report of the activities during the previous year** (Annual Report) for your group/organization.
- ☐ A **report on the programs/activities proposed for the upcoming year** for your group/organization.

PART A-APPLICANT INFORMATION

Community group/organization (applicant):

Title of project:

Contact name:

Title:

Mailing address:

Telephone:

Fax:

Email:

Federal Charitable Status Number (if applicable):

IN-KIND SUPPORT REQUESTED FROM THE TOWN OF FLORENCEVILLE-BRISTOL

Please check all that apply and briefly describe your requirements.

- ☐ Staff time:
- ☐ Services:
- ☐ Equipment:

PROJECT DESCRIPTION

Provide a brief description of the project you require the resources and why they are needed:

DECLARATION

The information provided on this application form and accompanying documentation is accurate to the best of my knowledge. I hereby give the Town of Florenceville-Bristol authority to verify any and all information pertaining to this application.

Application prepared by:

Signature

Print Name

Date

Board authorization (if applicable):

Signature

Print Name

Date

Town of Florenceville-Bristol approval:

Sarah Pacey, Chief Administrative Officer

Date