

**Council Grant Application - DUE OCTOBER 31, 2021**

**About the Organization**

Name \_\_\_\_\_ Address \_\_\_\_\_  
Contact \_\_\_\_\_ Position \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

# of volunteers in the organization \_\_\_\_\_

Are you a non-profit organization? \_\_\_\_\_

Charitable Registration Number (if applicable) \_\_\_\_\_

Is your organization location within the Municipality of Southwest Middlesex? \_\_\_\_\_

Has your organization made other applications to SWM for funds for this year? \_\_\_\_\_

Has your organization received funding assistance from SWM in prior years? \_\_\_\_\_  
When? \_\_\_\_\_ How Much? \_\_\_\_\_

Please provide your organizations purpose/mandate:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Proposed Event Details**

Name of Event \_\_\_\_\_  
Date of Event \_\_\_\_\_ Location of Event \_\_\_\_\_

Please provide a clear and concise summary of your proposal, including the goals and objectives of your proposal:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If this application includes assistance **other than direct financial assistance**, please outline the details of this request (i.e. type and estimated hours of staff support, facilities to be used, date of facility request, equipment requested, etc). Acceptance of this application does not guarantee other non-direct financial assistance.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe how your proposal supports the Municipality of Southwest Middlesex:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will this proposal provide services to the citizens of Southwest Middlesex? \_\_\_\_\_

Will your organization or another organization be the primary funder of this proposal?

Yes, our organization

Yes, another organization (name) \_\_\_\_\_

No

Please indicate the support being requested:

Financial assistance

Service or project

Waiving of facility fees

Staff support

Supply of equipment or materials

Insurance coverage

Use of municipal property or facilities

Other (describe) \_\_\_\_\_

Please indicate the category that best suits your request for assistance:

Tourism/Economic

Community

The Arts

Culture and Heritage

Environmental Awareness/Sustainability

Other (describe) \_\_\_\_\_

Funding Amount Requested: \$ \_\_\_\_\_

In-Kind Amount Requested: \$ \_\_\_\_\_

Please provide any additional details you feel are pertinent about your proposal.

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Signature of Contact \_\_\_\_\_ Date \_\_\_\_\_

Note: organizers of parades are required to provide liability insurance in the amount of \$2 million naming the Municipality of Southwest Middlesex as additional insured. The cost of obtaining such insurance may form part of any assistance application, along with the necessary staff support.

Please note that a grant in any year is not considered to be a commitment by SWM to continue such assistance in future years. It is not the intent of this grant program to become an annual component of an organizations budget plan.

Completed applications must be delivered by October 31 to:

Southwest Middlesex

153 McKellar Street

Glencoe, ON N0L 1M0

treasurer@southwestmiddlesex.ca