

## COMMUNITY RECREATION ASSISTANCE PROGRAM

### PROGRAM OBJECTIVES

- To help offset the cost of recreation programs and projects for the benefit of residents of the Municipality of Clare.

### CRITERIA

- Any Individual residing in the Municipality of Clare and attending any activity in or outside the municipality, as a participant, can be given up to \$200.00 per event to assist them with their expenses.
- Any Team or Group from the Municipality of Clare participating in an activity in or outside the municipality can be given up to \$500.00 per event to assist with their expenses.
- Individuals, teams or groups selected or that have won their way to go to a recognized sanctioned event at the Inter-Provincial, National or International level (this includes Maritime, Atlantic and East Coast events) can be given up to \$1,500.00 per event to assist them with their expenses.
- Include in your application a list of directors and a financial or bank statement.
- Annual assistance should not be anticipated.
- The Community Recreation Assistance Program is primarily designed to provide financial assistance to help offset the cost of recreation programs and activities.
- Applications should demonstrate sound planning on an annual basis, and must be submitted by viable volunteer organizations.
- Priority shall be given to applications which will generate new programs or activities in the community. Financial assistance through the Community Recreation Assistance Program should not be anticipated as an annual operating grant.
- Financial assistance is also available for individual leadership training in recreation, sport or cultural programs.

### ELIGIBILITY

- Include additional information that may support your grant application.
- Any individual, team or group is only eligible for the Community Recreation Assistance Program once every fiscal year.
- If your organization received funding from the Municipal Council Grants this fiscal year (April 1<sup>st</sup> to March 31<sup>st</sup>) then you are ineligible to receive funding from this Community Recreation Assistance Program.
- Any non-profit community group which operates, sponsors or encourages recreation programs for the benefit of residents of the Municipality of Clare may apply.
- Any individual who is recognized in his/her field or willing to take the proper leadership training in an area of sport/recreation or culture is eligible to apply.

## APPLICATION PROCEDURES

1. ALL applicants are required to use the standard grant application form available through the Clare Municipal Recreation Department.
2. Application(s) may be received at any time throughout the fiscal year. To be considered monthly; applications must be submitted by the 1<sup>st</sup> of every month.
3. Groups are asked to contact the Recreation Coordinator prior to submitting their application.
4. The committee may request a short presentation from the group.
5. ALL applicants shall be informed in writing, of the decision of the Clare Recreation Committee regarding their application.
6. The committee reserves the right to publish the names of the successful applicants.

# CLARE RECREATION DEPARTMENT COMMUNITY RECREATION ASSISTANCE PROGRAM

Name of organization: \_\_\_\_\_  
 Contact person: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_ Postal Code \_\_\_\_\_  
 Phone Number: (H) \_\_\_\_\_ (W) \_\_\_\_\_

1. Is this a new program? Yes \_\_\_\_\_ No \_\_\_\_\_
2. Does your group have a constitution or by-laws? Yes \_\_\_\_\_ No \_\_\_\_\_
3. a) How many members are active in your organization? \_\_\_\_\_  
 b) Are all members from the Municipality of Clare? Yes \_\_\_\_\_ No \_\_\_\_\_  
 c) If not, how many are from outside the region? \_\_\_\_\_
4. What age groups does your organization serve? \_\_\_\_\_
5. Please describe the proposed program: \_\_\_\_\_  
 \_\_\_\_\_
6. Included is a list of your executive members or officers. Yes \_\_\_\_\_ No \_\_\_\_\_

### PROJECTED BUDGET

A.) Cash on hand at beginning of period: \$ \_\_\_\_\_

#### ESTIMATED REVENUE

Registration Fees (participants)	\$ _____
Fund raising (specify)	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Grants: _____	\$ _____
_____	\$ _____
Sponsors & Donations:	
_____	\$ _____
_____	\$ _____

#### ESTIMATED EXPENDITURES

Leadership / Registration Fees	\$ _____
Supplies	_____
Travel	_____
Rentals	_____
Other	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

B.) Total Estimated Revenue \$ \_\_\_\_\_

C.) Total Estimated Expenses \$ \_\_\_\_\_

### PROGRAM BUDGET

Total Estimated Expenses (C)	\$ _____
Total Estimated Revenues (A + B)	\$ _____
Total (C - A + B)	\$ _____
<b>Grant Requested from Recreation Department</b>	\$ _____

**Note:** Properly completed applications will show that the Total Estimated Revenue, plus the Grant Requested, will equal the Total Estimated Expenses. Unbalanced requests will be returned to the applicant to be re-submitted.

I certify that the information supplied in this application is, to the best of my knowledge, exact and complete, and that the project has received approval of the organization I represent.

I agree to report back to the members of the Clare Recreation Committee with a written or verbal report of the results regarding the activity for which they granted me financial assistance.

Signatures:

\_\_\_\_\_ (President)  
 \_\_\_\_\_ (Treasurer)

**MAIL TO: CLARE RECREATION DEPARTMENT**  
 Municipality of Clare  
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