

SPORTS HOSTING PROGRAM APPLICATION FORM

APPLICANT CONTACT INFORMATION:

Name of Applicant (Organization:	
Mailing Address:		
Contact Person:		
Home Phone Numb	er:	Work Phone Number:
Email:		Fax Number:
PROJECT INFORM		
Dates of event:	Start Date:	
	End Date:	
Have you secured t	he host venue for this	event? Yes / No
Venue Name and L	ocation:	
Facility Operator/Le	aseholder:	
Name of Sanctionin	g Organization (Provi	ncial/National Sport Organization):
Have you secured t	he host hotel or hotels	s for this event? Yes / No
Please provide hote	el name:	
	ghts in total are you e oms for 3 nights, you v Between 50-100 r Between 101-200 More than 200 roo	oom nights room nights
How many participa	nts in total are you ex Less than 50 Between 50-100 Between 100-200 Between 200-300 More than 300	

How many spectators in total are you expecting for this event?

- □ Less than 100
- □ Between 100-300
- □ Between 300-600
- □ Between 600-800
- □ Between 800-1000
- □ More than 1000

To be eligible for funding through the Whitecourt Sports Hosting Grant Program, a brief understanding of the key objectives and planning for the event is required. The following checklists must be included with supporting documents as needed:

- Event Description/Details: Provide a detailed description of the event to be carried out including a timeline and/or outline for the event. Be sure to include information on opening/closing ceremonies, exhibitions, entertainment, and/or celebration components. If you have a document created with this information, you may choose to include this with your application.
- Budget: Provide an event budget showing revenues and expenses. If you have a document created with this information, you may choose to attach this with your application.
- Hosting Objectives and Marketing: A summary of the project objectives and details on how project activities will be implemented and promoted to meet the identified goals. If the Sports Hosting Program application is approved how will you use the funding? Should your event obtain a revenue surplus, indicate how this would be used. Identify how you will market your event in a detailed plan or overview to attract an additional audience to the event.
- □ **Financial Statement:** Provide your organization's latest financial statement. Please ensure the statement is dated and signed.
- □ **Proof of Non-Profit Status:** Please enclose proof of non-profit status with your application form.

Submit your completed application to:

Town of Whitecourt Sports Hosting Program Box 509, 5004 52nd Avenue Whitecourt, AB T7S 1N6 Attn: Whitecourt Economic Development Officer Email: economicdevelopment@whitecourt.ca

I DECLARE THAT:

- I AM A DULY AUTHORIZED REPRESENTATIVE HAVING LEGAL AND/OR FINANCIAL SIGNING AUTHORITY FOR THE ABOVE-MENTIONED ORGANIZATION.
- The information contained in this application and supporting documents is true and accurate and endorsed by the above-mentioned organization.
- An accounting of spending, showing compliance with donations of the grant shall be provided (including a project assessment and financial accounting summary) no later than 90 days following the project completion date.
- Any grant awarded shall be used solely for the purposes stated within this application and according to program parameters.
- As a condition of accepting financial assistance, access to all financial statements and records having any connection with monies received is hereby granted to the Town of Whitecourt.

Signature:	
Date:	
Print Name:	
Title:	
Contact Phor	e Number:

This information is being collected under the authority of section 33(c) the Freedom of Information and Protection of Privacy (FOIP) Act. It will be used to determine eligibility and administer the Tourism Enhancement Grant Program. The personal information provided will be protected in accordance with Part 2 of the Act. If you have any questions regarding the collection, use and disclosure of personal information, please contact the FOIP Coordinator at 780-778-2273.