

SPORTS HOSTING PROGRAM APPLICATION FORM

APPLICANT CONTACT INFORMATION:

Name of Applicant	: Organization: _				
Mailing Address:					
		Work Phone Number:			
Email:		Fax Number:			
PROJECT INFOR	MATION:				
Name of Sporting	Event:				
Dates of event:	Start Date:				
	End Date:				
Have you secured		for this event? Yes / No			
Venue Name and	Location:				
Facility Operator/L	easeholder:				
Name of Sanctioni	ng Organization	n (Provincial/National Sport Organization):			
Have you secured	the host hotel of	or hotels for this event? Yes / No			
Please provide hot	tel name:				
	ooms for 3 night	re you expecting for this event? (ex. If you think is, you would select 50-100): 50-100 room nights 101-200 room nights 200 room nights			
How many particip	ants in total are Less than Between 5 Between 1 Between 2	50-100 100-200 200-300			

Ho	w 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					
Pro ev	be eligible for funding through the Whitecourt Sports Hosting Grant ogram, a brief understanding of the key objectives and planning for the ent is required. The following checklists must be included with pporting 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: ecdev@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	ne 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.