



MUNICIPALITY OF THE COUNTY OF INVERNESS  
GRANT APPLICATION FORM

ARTS & CULTURAL PROGRAMS

***Instructions:***

***Please complete this application form and submit it, along with supporting documentation to:***

***[donna.macdonald@invernesscounty.ca](mailto:donna.macdonald@invernesscounty.ca)***

***or***

***Municipality of the County of Inverness***

***Attn: Donna MacDonald, Recreation/Tourism Director***

***375 Main Street Port Hood, NS B0E 2W0***

***(please follow-up email with phone call to confirm receipt of application)***

***Grants are subject to the availability of funds in Council's current year's operating budget. Approval of a grant application in any year does not imply or suggest that approval will be received in subsequent years.***

Name of Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Civic Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Project/Event Details:**

Name of event:

\_\_\_\_\_

Date(s) of event or proposed project start date: \_\_\_\_\_

**Page 2**

Describe the event/project: (attached a separate sheet if necessary)

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

Describe your program/event and include a brief description of your goals and objectives (attach a separate sheet if necessary)

---

---

---

---

How will your event/project benefit your community or the County of Inverness?

---

---

---

---

What other sources of funding/sponsorship have you applied for/accessed?

---

---

---

---

Please provide a proposed budget and any other information you feel should be considered when evaluating your application. (Use back of application or separate sheet.)

---

---

On behalf of \_\_\_\_\_, I/we hereby declare that all the  
organization name

information presented and/or provided with this application is true and correct.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date: