

RECREATION ASSISTANCE GRANTS

The Municipality of the County of Inverness Recreation & Community Wellness Department recognizes the need for financial aid to support smaller-scale locally based community recreation initiatives and projects. In response to these needs the Recreation Department has established the following support funding allotments:

- ☐ Winter Active
- □ Seniors Active
- Outdoor Recreation
- □ Youth Leadership/ Travel Support
- □ Sport Development

- □ School Equipment Partnership
- ☐ Recreation Community Capacity Building/ Instruction Certification
- □ Community Special Event
- □ Gender Equity and Inclusion

General Eligibility Criteria

- Applicants must be a registered non-profit, registered and in active status with the Nova Scotia Registry of Joint Stock Registry.
- Funding is not awarded to an individual, commercial business, industry, or sole proprietorships.
- Projects, programs, and events all must occur within the municipal boundary of the County of Inverness.
- The municipality is non-partisan and does not provide funding to religious groups or political doctrine.

Maximum amount of funding available: \$1000.00

Please Note: Grants have additional grant specific requirements and criteria. For more information please contact the Recreation Department by phone: 902-787-3508 or email: jason.calder@invernesscounty.ca

CANADA'S
MUSICAL
COAST
Inverness County

Recreation Department Phone: 902-787-3508 Fax: 902-787-3110 Email: Jason.Calder@invernesscounty.ca

COMMUNITY GROUP REQUEST FOR SUPPORT

Today's	Foday's Date: Charitable Organization #:					
Name c	of your organization/registered non-prof	t:				
Address	s:		_			
Commu	unity: F	Postal Code:	<u>-</u>			
Contact	Name:					
Phone	Number(s): E-mail Address:					
local co or orga	ommunities and whether you receive fun nizations:	iding from a	our goals, principals, how it benefits our ny other local or national groups, charities,			
Amount Requested:		Total Project Budget:				
Event/p	roject for which support is requested: _					
Date of Event/project :		Time:				
Place 8	Location of event:					
Anticipated attendance:		Is this a first time or ongoing event/project?				
	T THE REQUEST elp us categorize your proposal:					
	Winter Active Seniors Active Outdoor Recreation	0	Recreation Community Capacity Building/ Instruction Certification Community Special Event			
	Youth Leadership/ Travel Support Sport Development School Equipment Partnership		Gender Equity and Inclusion Other			



Project, Program or Event Budget

Expense Amount	Expense Description	Additional Revenue (ex: fundraising)	Total Requested			
Office Use	e Only:					
Process Date:						



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