



AMATEUR SPORT GRANT APPLICATION FORM

Organization Information		Application Date:	
Name of Non-Profit Organization:			
Provincial Incorporation Number: (AB Societies Act)		Date of Incorporation:	
Mailing Address:			
Phone Number:			
Contact Information			
Primary Contact:			
Email:			
Phone Number:			
Secondary Contact:			
Email:			
Phone Number:			
Project Information			
Project Title:			
Project Location: (Address)		Ward:	
Brief Project Description: Clearly describe your project and the impact it will have on your community			
Project Start Date: (MM/DD/YY)		Project End Date: (MM/DD/YY)	
Grant Amount Requested:		Total Project Budget:	



AMATEUR SPORT GRANT APPLICATION FORM

Project Description	
<p>Demographics:</p> <p>- Please select all categories that will benefit from the project</p>	<p>General <input type="checkbox"/> Teens (13-18) <input type="checkbox"/> Organized teams <input type="checkbox"/> High performance athletes <input type="checkbox"/></p> <p>Seniors <input type="checkbox"/> Children (5-12) <input type="checkbox"/> Families <input type="checkbox"/></p>
<p>Sport and Community Impact:</p> <p>- What barriers are you facing?</p> <p>- What is the current condition of your club/ organization or facility?</p> <p>- Why does your sport or organization need this project to be successful?</p>	
<p>Project Impact on Sport Development:</p> <p>- How does it impact sport development?</p> <p>- Is it vital to the growth and advancement of the sport?</p> <p>- Will it increase athlete participation?</p> <p>- Who will benefit and why? What will the impact be?</p>	



AMATEUR SPORT GRANT APPLICATION FORM

Membership Profile	
<p>Membership Details:</p> <ul style="list-style-type: none">- Age groups- Caliber of athletes- Number of members/group	
<p>Membership and/or Rental Fees:</p>	
<p>How would you recognize Parks Foundation?</p>	



AMATEUR SPORT GRANT APPLICATION FORM

Project Budget				
Total Project Budget:				
Revenue Sources:	Confirmed	Pending	In-Kind	Total
Total Project Revenue (Should equal total project expenses)				
Project Expenses: Please detail all of the anticipated expenses for the project (eg. Materials, equipment, landscaping, facility upgrades, etc.)				Total:
Total Project Expenses				



AMATEUR SPORT GRANT APPLICATION FORM

Quote Summary: (please list quotes below)			
Product/Equipment Description <small>(three quotes are required for each item—include copies of quotes as part of your application)</small>	Quote #1	Quote #2	Quote #3
TOTALS			



AMATEUR SPORT GRANT APPLICATION FORM

The checklist below outlines the additional documentation required to complete your application.

Document Checklist		
Document:	Yes	No
Certificate of Incorporation		
Most Recent Annual Return or Proof of Filing		
Most Recent Financial Statement from the Organization		
Organization's Budget for the Current Year		
List of Board of Directors		
Letter of Permission from Landowner (if applicable)		
Community Letters of Support		
THREE Vendor or Contractor Quotes (per item)		
Project Design or Plan (if chosen)		

**** All applicants are encouraged to contact the Parks Foundation office to discuss project eligibility**

Two copies of your application are required upon submission, one completed electronic application and one hard-copy application.

Electronic applications can be submitted to programs@parksfdn.com with subject line "Amateur Sport Application - Project Name". Submit your application as a single file.

If the application file is too large please consider using a Google Drive or a Dropbox link.

Hard copy applications can be dropped off or mailed to:
 Amateur Sport Grant Program
 Parks Foundation Calgary
 225-13th Avenue SW
 Calgary, AB T2R 1N8

Submitted by: _____

Date: _____