



ROTARY CLUB OF COLLINGWOOD – SOUTH GEORGIAN BAY APPLICATION FOR FUNDING

Thank you for considering an application for funding from the Rotary Club of Collingwood – South Georgian Bay (RCCSGB).

Please read the Introduction and Instructions carefully as the application process has been revised from previous years. Also be sure to use this version of the application form.

Introduction & Instructions

Through various fundraising initiatives organized each year in Collingwood, the Rotary Club of Collingwood South Georgian Bay (RCCSGB) is able to distribute funds to help support projects and organizations within the community of Collingwood and internationally.

Our club's goals are to support Youth and Rotary's 7 Areas of Focus. Please review the areas of focus outlined on the next page to aid in determining where your request for funding fits.

*Applications for **summer** funding must be submitted before **March 30th**. All other funding applications must be in before **May 15th**.*

*It is the club's goal to provide **summer** funding by **May 20** and other funding by **August 20**.*

Funding is not provided for capital or operating costs.

Please send your completed application to rotarysgb@totaleworks.net

CLASIFICACION OF REQUEST

1. Rotary’s Areas of Focus



For further details on Rotary’s 7 areas of focus. Please visit: rotary.org/en/our-causes

2. Considering Youth as well as Rotary’s Areas of Focus please check off which area(s) that this request falls into:

- | | |
|--------------------------------|-------------------------------------|
| Youth | Peacebuilding & Conflict Resolution |
| Disease Prevention & Treatment | Water, Sanitation & Hygiene |
| Maternal & Child Health | Basic Education & Literacy |
| Community Economic Development | Environment |

3. In which time period does your organization require the funds?

May through August

September through April

RECIPIENT INFORMATION

1. Name of Organization:

2. Contact Information:

Contact Name:

Postal Address:

e-mail Address:

Phone Number:

3. Does your organization have Charitable Status?

Yes No

If yes, please provide Charitable Organization name:

CRA Charitable Number:

4. How important would the funding be to this project and to your organization?

Total Budget of the program or project where the donation would be used? \$

Total Annual Fund-Raising Budget of your organization?

5. Does your organization receive funding from any governmental agencies or other service clubs?

Yes No

FUNDING REQUEST DETAILS

1. Request amount \$ _____

2. Description of how the funds would be used:

3. Description of publicity or advertising by your organization that will promote Rotary and/or the project:

4. Describe the anticipated community benefit:

5. How many people will be impacted by the project?

1 to 5 6 to 19 20 to 99 100 or more

<i>Name of the person signing</i>	_____
<i>Title of the person signing</i>	_____
<i>Signature</i>	_____
<i>Date</i>	____ / ____ / ____ <i>mm dd yyyy</i>