



SPECIAL EVENTS AND FESTIVALS  
GRANT APPLICATION

INDIVIDUAL/ORGANIZATION INFORMATION

SECTION 1

Name of Individual/Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_ (fax) \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Incorporation Number: \_\_\_\_\_

First time applicants to submit proof of Articles of Incorporation and Amendments thereto.

GRANT REQUEST

SECTION 2

Amount requesting from the City \$ \_\_\_\_\_ Percentage of total budget \_\_\_\_\_

Have you previously received funding under the City of St. John's Grant Program?  Yes  No If yes, most recent year: \_\_\_\_\_

Provide a brief description of the intended use of the funds requested, i.e. activity, program, event.

Briefly describe the purpose and objectives of your organization:

Describe the general types of programs and services being offered by your organization:

Do volunteers participate in your programs and services?  
If yes, please indicate the numbers and type of involvement:

Yes  No

Applications **must** be accompanied by local organization financial statements for the previous year (audited if available) and current year local organization budgets.

The following template is provided for current year organization budget; however, you may submit as an attachment in an alternate format.

Is the fiscal year for your organization January 1 to December 31? If not, please identify \_\_\_\_\_

We require a detailed **balanced** budget for your local organization.

Revenue	2018 Actual (or est.)	Budget for 2019 Year	Requested	Confirmed
Federal Government Grants			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
Provincial Government Grants			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
Private/Other Grants			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
Donations				
Adult Membership Revenue				
Child/Youth Membership Revenue				
Other Membership Revenue				
Other Revenue (Specify)				
Prior Year Surplus/Deficit				
Sub-Total				
Requested City Grant				
<b>Total Revenue</b>				

Expenditures	2018 Actual (or est.)	Budget for 2019
Salaries and Benefits		
Office and Equipment Supplies		
Other Expenses		
Facility Rental		
Equipment Costs		
Insurance		
Travel/Conferences		
Interest and Bank Charges		
Professional Fees		
<b>Total Expenditure</b>		

Total 2019 Revenue	
Total 2019 Expenses	

We require a detailed **balanced** budget for your local organization.

We require a detailed **balanced** budget for your special event or festival.  
 Template provided, however you may submit in an alternate format.

Summary of Estimated Special Event or Festival Costs	
Description	Cost

Summary of Proposed Financing of Project				
Source	Description	Requested or Confirmed		Value
Federal Government Grants		<input type="checkbox"/>	<input type="checkbox"/>	
Provincial Government Grants		<input type="checkbox"/>	<input type="checkbox"/>	
Private/Other Grants		<input type="checkbox"/>	<input type="checkbox"/>	
Donations		<input type="checkbox"/>	<input type="checkbox"/>	
Other (Specify)		<input type="checkbox"/>	<input type="checkbox"/>	

If you have received funding in the previous year, your final report must be submitted in order to be eligible. No new applications for grant funding will be processed unless a final report has been received.

**Festival/Event Information:**

Festival/Event Name: \_\_\_\_\_

Dates: \_\_\_\_\_ to \_\_\_\_\_

Estimated Daily Attendance: \_\_\_\_\_

Paid Admission: \_\_\_\_\_ Free Admission: \_\_\_\_\_

Attach a list of proposed activities and/or event schedule to support your application.

**Community & Economic Benefits:**

The benefits to be realized by the community at large. Outline how it will demonstrate a positive impact on the community, how it will focus on celebrating our distinct culture and heritage and how it will be accessible to all residents.

Outline the overall economic impacts of the festival/event on performers/contractors, the venues being used and community partnerships.

**Marketing:**

Outline how your marketing/promotional activities will be undertaken, including acknowledgement of the contribution of the City of St. John's. Samples of relevant materials are accepted. NOTE the City of St. John's CANNOT accept USB data storage devices as our security measures prevent us from being able to access them.

It is the responsibility of the applicant to ensure all required information is submitted. Incomplete applications will be considered ineligible.

I AFFIRM THAT the information in this application is accurate and complete and the financial information is fairly presented. I agree that once funding is provided, any change to the organization program delivery will require prior approval from the City of St. John's. I agree to publically acknowledge funding and assistance by the City of St. John's. I understand that the information provided in this application may be accessible under the Access to Information Act. I also agree to respect the spirit and intent of the various acts governing the programs of the City of St. John's.  
Signature of two principal officers of the group or organization:

\_\_\_\_\_  
Name Title Date (yyyy-mm-dd)

\_\_\_\_\_  
Address City/Province Postal Code

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name Title Date (yyyy-mm-dd)

\_\_\_\_\_  
Address City/Province Postal Code

\_\_\_\_\_  
Signature

**Important Information**

Deadline for applications: The last Friday in November at 4 p.m.

Ensure that you have completed all sections and enclosed all requested documentation:

- Local Organizational Financial Statements
- Detailed **balanced** budget
- Local Program Statistics

Incomplete applications will be considered ineligible

Submission Information		Inquiries
Electronic	Hard Copy	For More Information
Email: <a href="mailto:citygrants@stjohns.ca">citygrants@stjohns.ca</a>	Access St. John's First Floor, City Hall	Email: <a href="mailto:citygrants@stjohns.ca">citygrants@stjohns.ca</a>
Emails including all attachments <b>must not exceed 25MB</b> . Acceptable file formats are: pdf, docx, xlsx, jpg, png, mp3, wav, mp4, mpeg, mov, zip.	<b>or</b> 10 New Gower Street; P.O. Box 908 St. John's, NL A1C 5M2 Attention: City Grants	Call: (709) 570-2186