

## P.O. BOX 1642, RIDGETOWN, ONTARIO NOP 2CO

www.ridgetownkiwanis.com email: ridgetownkiwanis@gmail.com

## The Kiwanis Club of Ridgetown Application for grant or project funding

The Kiwanis Club of Ridgetown normally requires a one to two month turnaround time in processing funding applications. We receive far more requests each year than we are able to fund. All grant requests are considered by the Board of Directors. All decisions of the Board are final.

Complete the following application, print and sign the form and mail to: Kiwanis Club of Ridgetown P.O. Box 1642 Ridgetown, ON NOP 2C0

Or email to: ridgetownkiwanis@gmail.com

The Kiwanis Club of Ridgetown supports projects that are:

- Charitable
- Educational
- Cultural
- Recreational
- Environmental
- Medical needs for individuals

Funds are awarded for specific projects covering a specific period of time. Funds are not awarded to support ongoing operating expenses. Organizations and individuals seeking funding must be able to demonstrate fiscal responsibility and capable management.

The Kiwanis Club of Ridgetown is interested in encouraging projects that will serve young children and youth in our community – birth to 19 years of age. Projects benefiting other areas of our community will be considered. Proposals should demonstrate clearly defined and researched need and evidence of support from other organizations for service groups.

The Kiwanis Club of Ridgetown does not consider funding applications:

- For religious, sectarian or political purposes
- To reduce deficits
- To retire debt
- To endowments of other organizations or foundations
- To support fundraising activities of national or provincial groups
- To organizations that are totally government funded

The Kiwanis Club of Ridgetown looks for marketing and promotional opportunities in an effort to promote the good work of Kiwanis. If appropriate, approved grant recipients may be asked for permission to release information and or photos to local media. Any personal information of individuals will be kept confidential.



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## **APPLICATION**

Name:		
Address:		
Contact address/phone:		
Contact email:		
Describe the work you do in impact children and youth in	our community and how your funding request will our community.	directl
Amount requested:		
Total funds needed:		
Have you requested funds fo	r this project from other organizations?	
Amount received from other	organizations:	
Describe why you need this f sufficient.	funding and why other sources of funding are not	

Describe the project/activities the grant will be used to support and when they will occur.
Describe why this project/activity is needed.
How will the Kiwanis Club of Ridgetown be promoted should you be granted funding? For individual medical donations promotion is not needed to keep personal information confidential
Any further information you deem important to share that would support your request should be attached to this application.
NAME OF APPLICANT (BLOCK LETTERS)
DATE OF APPLICATION
SIGNATURE OF APPLICANT