

Community Recreation Programming Assistance Grant 2025/26 Application

The Municipality of the County of Kings believes in supporting the work of community organizations through grants to registered non-profit organizations. Council has adopted a **Community Grants Policy** which you can find at www.countyofkings.ca/grants. Please review the policy for more details about the review and evaluation of applications and the grant awarding process.

The <u>Community Recreation Programming Assistance Grant</u> assists community organizations providing recreation programming, to individuals within the County of Kings. Programming costs, part-time staffing or program equipment are permitted expenses. Funds may also be directed at new or established programming, leadership, leisure activities, or group education.

Maximum Assistance Available

- Up to 100% of **net** programming costs (expenses *less* revenue), to a maximum 50% of <u>each</u> program cost.
- Application cap for any one organization is \$10,000 for any number of programs.

Application Deadline

Applications must be received no later than 4:30pm **May 01, 2025** via email or hard copy. We encourage you to apply early and seek assistance as required.

Applications must be submitted on this form with all required information by the deadline. It is the sole responsibility of applicants to submit a complete application. Failure to submit a complete application by the deadline will exclude the application from consideration. Please note that submission of a request does not guarantee any funding.

Submission

Please submit your complete application and any accompanying documents by mail or e-mail to:		
Mailing Address:	Municipality of the County of Kings Attn: Community Grants 181 Coldbrook Village Park Dr. Coldbrook, NS B4R 1B9	
Email Address:	grants@countyofkings.ca	

Estimated Timeline for the 2025-26 Community Recreation Programming Assistance Grant

<u>May:</u> Applications reviewed for completeness and eligibility by Municipality of the County of Kings Grants Administrator.

June: Evaluation of all applications to the program by Municipality of the County of Kings staff.

<u>June/July:</u> Final grant allocations approved by Municipality of the County of Kings Chief Administrative Officer; communication to all applicants, including distribution of cheques for successful grants.

^{*}Tournaments, competitions, or regional events are not eligible for funding under this program.

Evaluation

All grant applications are assessed independently by municipal staff after the grant deadlines.

Applications are evaluated based on three main criteria:

Criteria	Considerations		
Budget Considerations	 Accuracy, Level of detail (for planned expenses and income), Efforts toward fundraising and securing other funding, Reasonability, and Financial viability of the project and applicant organization. 		
Community Impact	 Project reach and capacity, Extent the project it addresses a community need, Availability of public access, Added value to residents, Degree of cooperation and collaboration between community groups, and Contribution of volunteers. 		
Organizational & Project Effectiveness	 Sustainability and viability of the organization and project, Efficient use of resources, Legacy of the project and applicant organization. 		

Project Reporting/Accountability

Grant recipients are required to submit a report on the use of municipal funds.

The Policy establishes that accountability requirements are based on the amount awarded (see Policy for more details):

- Awards of \$7,500 or less are required to submit a summary of how the funds were used
- Awards of more than \$7,500 and less than \$30,000 will require proof of actual expenses and payment

Receipt of this report will be a precondition for consideration of the organization's future grant applications.

Failure to submit accountability reports by the required deadline will result in any remaining funds being withheld and render the organization ineligible for future program applications until such time that the necessary reports are received. Grants will be revoked should there be a misappropriation of funds or misrepresentation by the receiving organization.

If you have any questions staff are available to assist you. Please contact the Grants Administrator at your convenience,

E-mail. grants@countyofkings.ca

Phone. 902-690-6191

Section 1 – Applica	ant Informati	on		
Applicant Organization Name				
Primary Contact at Organization				
Organization's Mailing Address				
Organization's Physical Address (if different from mailing)				
Daytime Phone Nui	mber			
Email Address				
Section 2 – Total R	Request	,		
Total Amount Requ	-			
Note: Total amount	Note: Total amount requested cannot exceed the maximum \$10,000 cap.			
Section 3 – About	the Organiza	tion		
	Registered with the NS Registry of Joint Stocks as a non-profit of association, society, or organization. Registry number:			
What is the status of your non-profit organization?		gistered Canadian Charity O number:		
Organization:	Mu	nicipal Government (Town or Village)		
	Firs	t Nations' Government		
	A se	chool within the County of Kings affiliated with the AVRCE or CSAP		
Award		PLEASE NOTE: ill be issued to the registered organization named in the istry of Joint Stocks/Charity information		
Tell us about the O What is the manda	•	re the goals? What type of things does the Organization do?		

Section 4 – About the funding request(s)

Please	answer the following questions in relation to the programs included in this application:
1.	Describe what makes this program needed and the impact it will have on residents and the area. Are there similar programs offered in the area?
2.	What does success look like? Can programming be expected to continue annually?
3.	Describe the total funding for this programming.
J.	In addition to funding support, is there any collaboration of resources being utilized?

ages/abilities? Are there any requirements of the participants?
5. How is the program advertised to attract participants?
Section 5 – Budget & Funding
The Municipality requires particular financial information from applicants depending on the amount of the request. *Check boxes to confirm this information has been included with your application*
Requests of \$7,500 or less must provide,
A report of the organization's financials (showing all revenues and expenses)
A proposed budget/income statement
Requests of more than \$7,500 must provide,
A current balance sheet
A proposed budget/income statement

4. Is this programming designed for a specific group or open for participation of all

For each individual program you are seeking funding assistance,

of completed 'Programming Funding Assistance Request Form' attached:

COMPLETE a 'Programming Funding Assistance Request Form' attached to this application. Use as many as needed & Be sure to include all costs and revenues, and include any quotes.

Section 6 - Declaration

We are submitting this application for the purpose of obtaining financial assistance from the Municipality of the County of Kings. The statements contained in this application are, to the best of our knowledge, true and correct. We submit that all aspects of this proposed project will comply with existing municipal, provincial, and federal codes, guidelines, orders and laws. We acknowledge that any misrepresentation or misappropriation of funds will result in the grant being revoked.

We understand it is our responsibility, as the applicant, to ensure adherence to any Health Protection Act Orders or other provincial guidelines related to safety and/or gatherings.

We agree to allow representatives of the Municipality of the County of Kings to inspect the site of the project described in this application, to audit the books and records of the applicant, to make inquiries, and to obtain all pertinent information necessary to evaluate this application.

We understand that all or part of this application may be made available to the public in accordance with the federal Access to Information and Protection of Privacy Act and the provincial Freedom of Information and Protection of Privacy Act.

Organization President Name (Printed):
Organization President Signature:
Date:
Organization Secretary/Treasurer/Authorized Member Name (Printed):
Organization Secretary/Treasurer/Authorized Member Signature:
Date:

To ensure a complete application, please use the check boxes below:

All previous years grants have been closed (as applicable)
Application form is complete and signed
Organization's Financial Information is attached
'Programming Funding Assistance Request Form' is attached for each program
Additional Supporting material attached as applicable

Programming	Funding	Assistance	Request	Form -	Complete:	1 per	program
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Program Name	
Program Dates	
Location of Program	
Number of Attendees	
Age range of participants	

Expenses	
Wages	\$
Program equipment and materials	\$
Program insurance	\$
Facility rentals	\$
Other expenses (describe/identify specifics)	\$
	\$
	\$
	\$
(A) TOTAL EXPENSES	\$

Revenues	
Registration fees	\$
Community group contribution	\$
Fundraising	\$
Donations	\$
Other revenues (describe/identify specifics)	\$
	\$
	\$
	\$
(B) TOTAL REVENUES	\$
(C) Difference of Expenses less Reve	/enue \$
(A) - (B) = (C)	
	4
Amount requested for this prog	
Max. available	e = (C)
Maximum Assistance: 100% of net programming co	costs to a max. of 50% of program cost.

Programming Funding Assistance Request Form – Complete 1 per program

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Location of Program	
Number of Attendees	
Age range of participants	

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Program insurance	\$
Facility rentals	\$
Other expenses (describe/identify specifics)	\$
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	\$
(A) TOTAL EXPENSES	\$

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Registration fees	\$			
Community group contribution	\$			
Fundraising	\$			
Donations	\$			
Other revenues (describe/identify specifics)	\$			
	\$			
	\$			
	\$			
(B) TOTAL REVENUES	\$			
(C) Difference of Expenses less Rev	enue \$			
(A) - (B) = (C)				
Amount requested for this pro	ram \$			
Max. available	= (C)			
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