

POLICY TITLE: Winter Games Legacy Grant Fund Policy

POLICY #: R-004-002

EFFECTIVE DATE: March 9, 2009

ADOPTED BY COUNCIL ON: March 9, 2009

RESOLUTION #: 67.03.09

SUPERCEDES: #C-004-008

---

## **POLICY STATEMENT**

The Town of Sylvan Lake is a vibrant, progressive community and recognizes the need to support individual athletes, coaches and sport development within the community. By assisting with recreational and sporting opportunities, the Town of Sylvan Lake will enhance the quality of life and well-being of its citizens.

## **PURPOSE**

The purpose of the Town of Sylvan Lake Winter Games Legacy Grant Program is to provide for individual athletes, coaches and sport groups within Sylvan Lake access to funding to support training, to attend high level sporting events outside of Sylvan Lake, to pursue coaching educational and developmental opportunities, or to host sporting events that will benefit the community.

## **DEFINITIONS**

- A. Applicant: shall mean the individual submitting an application for funding
- B. Committee: shall mean the Community Services Standing Committee
- C. Community: shall mean the Town of Sylvan Lake & surrounding area
- D. Council: shall mean the Council for the Town of Sylvan Lake
- E. Town: shall mean the Town of Sylvan Lake

## **PROCEDURES**

### **1. Criteria**

- 1.1 Winter Games Legacy Grant Fund monies are available to residents within in the Town of Sylvan Lake or;
- 1.2 The applicants' home club / team must be based in the Town of Sylvan Lake.
- 1.3 Hosting applications must be for events being held within the Town of Sylvan Lake and should:
  - 1.3.1 Stimulate appreciation of the sport within the community;
  - 1.3.2 Build community support, increase membership, develop wider audiences or attract visitors;
  - 1.3.3 Be a provincial, national or international level competition.
- 1.4 In order for a group or organization to be eligible for monies from the Winter Games Legacy Grant Fund the following criteria must be met:
  - 1.4.1 The organization must be a registered non-profit society or group officially incorporated or registered for a minimum of one year under federal or provincial law. If the organization has not yet achieved this status they may apply under another registered non-profit within the Town of Sylvan Lake.
  - 1.4.2 The organization must be based within the Town of Sylvan Lake's corporate boundaries.
  - 1.4.3 One application per organization per year. (Schedule "A")
  - 1.4.4 The project or event must be completed by the end of the year that the Winter Games Legacy Grant Fund monies were applied for, unless otherwise approved in writing prior to the year end.
  - 1.4.5 The organization must demonstrate the following:
    - 1.4.5.1 Membership;
    - 1.4.5.2 Planning and Management;
    - 1.4.5.3 Additional fundraising efforts;
    - 1.4.5.4 A specific need for funds requested;
    - 1.4.5.5 Level of financial stability;

- 1.4.5.6 Benefit of the project to the community.
- 1.4.6 Organizations must have completed any required reports and or financial statements for projects that have previously received Town of Sylvan Lake Winter Games Legacy Grant Fund monies.
- 1.4.7 Funding Recipients must:
  - 1.4.7.1 Enter into a “Letter of Agreement” with the Town of Sylvan Lake if the application is approved;
  - 1.4.7.2 Agree that any project shortfalls will be their responsibility;
  - 1.4.7.3 Agree to recognize the Town of Sylvan Lake’s Winter Games Legacy Grant Fund contribution to the event or project in all related public information, printed material and media coverage.
  - 1.4.7.4 Agree to provide the Town of Sylvan Lake with a follow-up report on the event or project. This report is to be received no later than 90 days following completion of the event or project and must include a budget summary.

## **2. PROCESS**

- 2.1. Organizations / individuals will be responsible for completing the Winter Games Legacy Grant Fund application form, which will be available through the Recreation, Parks & Culture Office or the Town of Sylvan Lake web-site.
- 2.2. Applications must be received by the established deadline and relate to an event or project intended for the upcoming year.
- 2.3. The Recreation, Parks & Culture Director, or delegate, will review all applications for eligibility and completeness of information.
- 2.4. Applications that have met the required eligibility criteria and include the required information will be forwarded to the Community Services Standing Committee for review.
- 2.5. Applicants or organizations requesting Winter Games Legacy Grant Fund monies may be asked to make a brief presentation to the Community Services Standing Committee.
- 2.6. The Community Services Standing Committee will provide approval or denial of the applications.
- 2.7. The Recreation, Parks & Culture Department will notify all applicants of the decision regarding their application for Winter Games Legacy Grant Fund monies.
- 2.8. Funds will be distributed to the successful applicants upon the signing of a written “Letter of Agreement” by the applicant. The applicant also agrees to return any unused portion of the Winter Games Legacy Grant Fund monies with the final report on the event or project.

### **3. Maximum Funding**

3.1. Maximum funding amounts are:

3.1.1. Individual Athlete / Coach - \$500 per year

3.1.2. Event Hosting - \$2,000 per year.



**Schedule 'A'**  
**Winter Games Legacy Grant Fund**

**APPLICATION**

Application Deadline: September 30<sup>th</sup> of each year

**1. Organization / Individual**

a) Name:

---

b) Mailing Address:

---

---

c) Contact:

Name / Title:

---

Email:

---

Phone:

---

Fax:

---

d) Society or Charity Registration No.: 

---

e) Year officially incorporated or registered: 

---

f) Number of Registered Members: 

---

g) Please attach proof of insurance for this project.

h) In which of the following areas is the organization involved:

☐ Athlete

☐ Coach Development

☐ Event Hosting

i) What other organizations, if any, is this organization affiliated with:

---

---

---

- j) Brief overview of organization and service provided to the community. Attach additional sheets if necessary.

---

---

## 2. Project

a) Name:

---

b) Date or Time Frame

---

---

c) Description (include goals, itinerary, target audience, timeline, etc.). Attach additional sheets if necessary.

---

---

---

---

d) Explanation of organization's capabilities to plan and manage the project (i.e. past experience, staffing or volunteer support, financial stability).

---

---

---

---

e) Please indicate how this project will benefit the organization's membership and the community.

---

---

---

---

---

f) Is the project (please check appropriate box)

☐ Annual

☐ One Time Project

|

### 3. Financial

a) Please attach a proposed detailed budget for the project.

b) Amount of funding being requested from the Town of Sylvan Lake?

(Maximum: Individual - \$500 / Event Hosting - \$2,000)

---

c) What, if any, specific purpose will Winter Games Legacy Grant funding be used for?

---

---

---

d) What, if any, fundraising initiatives will the organization / individual be undertaking for this project?

---

---

---

e) What percentage of the budget will be supported by fund-raising efforts?

---

f) Has the organization contacted other community organizations or groups to form a partnership for this project?

☐ Yes

☐ No

If yes, which organization(s) and to what extent is the partnership?

---

---

---

g) Will the organization be requesting any "in kind" support from the Town of Sylvan Lake for this project?

☐ Yes

☐ No

If yes, to what extent?

---

---

h) If this application is approved for partial funding only, is the organization prepared to proceed with the project?

☐ Yes

☐ No



**4. Reporting**

- a) Is a representative of the organization willing to give a brief presentation to the Sylvan Lake Community Services Standing Committee?

☐ Yes

☐ No

**5. Verification**

The undersigned verifies that the information provided in this application is correct and complete.

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Position with Organization

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*The personal information requested in this form is being collected for the purpose of determining eligibility of an applicant to receive Community Grant Program funding. The information is collected under the authority of Section 32 (c) of the Freedom of Information and Protection of Privacy Act. Questions regarding the collection of this information may be directed to the FOIP Coordinator at 4926 – 50 Avenue, Sylvan Lake, Alberta T4S 1A1.*

**The following section is for the Town of Sylvan Lake administration only.**

1. Application No. \_\_\_\_\_
2. Date Received: \_\_\_\_\_
3. Date Reviewed: \_\_\_\_\_
4. Date of Committee Decision: \_\_\_\_\_
5. Funding Approved  
☐ Yes ☐ No
6. Amount of Funding: \_\_\_\_\_
7. Date Organization Notified: \_\_\_\_\_
8. Date Letter of Agreement Signed: \_\_\_\_\_
9. Date Funds Distributed to Organization: \_\_\_\_\_
10. Follow-up Report Received  
☐ Yes  
☐ No  
  
Date: \_\_\_\_\_