## 2026 Council Grant Program Council Grant Application – DUE OCTOBER 31<sup>ST</sup>, 2025

	About the Organization		
Negar	Address		
Name	Address		
Contact	Position		
Email	Phone	F8	ax
No. of volunteers in the organization	<del></del>		
Are you a non-profit organization?			
Charitable Registration Number (if applicab	,		
Is your organization location within the Tow	·	Yes	No
Has your organization made other application	·	Yes	No
Has your organization received funding ass When?	, , ,	Yes	No
Please provide your organization's purpose			<del></del>
	Proposed Event Details		
Name of Event			
Date of Event	Location of Event		
Please provide a clear and concise summa	ry of your proposal, including the goals and obj	ectives of	your proposal.
If this application includes assistance <b>other</b>	than direct financial assistance, please outl	ine the de	tails of this request (i.e.
• •	acilities to be used, date of facility request, equ		• •
	rantee other non-direct financial assistance.		44.00.004, 0.0.7.
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Please describe how your proposal support	s the Township of Adelaide Metcalfe.		

## **Council Grant Program**

Will t	this proposal provide services to the citizens of Adelaide Metcalfe	Yes	No			
Will	your organization or another organization be the primary funder of this proposal					
0	Yes, our organization					
0	Yes, another organization (name)					
0	No					
Please indicate the support being requested:						
0	Financial Assistance					
0	Service or Project					
0	Waiving of Facility Fees					
0	Staff Support					
0	Supply of Equipment or Materials					
0	Insurance Coverage					
0	Use of Municipal Property or Facilities					
0	Other (describe)					
Plea	Please indicate category that best suits your request for assistance. Refer to the Council Grants Policy for category					
definitions.						
0	Tourism/Economic					
0	Community					
0	The Arts					
0	Culture and Heritage					
0	Environmental Awareness/Sustainability					
0	Other (describe)					
Fund	ding Amount Requested: \$					
In-Ki	ind Amount Requested: \$					
Please provide any additional details you feel are pertinent about your proposal.						
Signature of Contact						

**Note:** Organizers of parades are required to provide liability insurance in the amount of \$2 million, naming the Township of Adelaide Metcalfe as additional insured. The cost of obtaining such insurance may form part of any assistance application, along with the necessary staff support.

Please note that a grant in any year is not considered to be a commitment by Adelaide Metcalfe to continue such assistance in future years. It is not the intent of this grant program to become an annual component of an organizations budget plan.

Completed applications must be delivered by October 31 to:

Township of Adelaide Metcalfe 2340 Egremont Drive Strathroy, ON N7G 3H6

Email: jpereira@adelaidemetcalfe.on.ca