



Kinsmen Club of Edmonton

River Valley Place, P.O. Box 103, 9100 Walterdale Hill, Edmonton, Alberta, T6E 2V3

Dear Applicant,

For over 75 years, the Kinsmen Club of Edmonton has served some of our community's greatest needs through ongoing, seed and project funding of human service programs and capital projects. The Kinsmen Club of Edmonton has supported efforts such as the Operation Friendship Seniors Society, Boys and Girls Club, WIN (Women In Need) House, Canadian Blood Services, Glenrose Rehabilitation Centre, and the Alberta Asthma Centre to mention a few and we are always looking for new and exciting ways to improve the community in which we live. To that end the Kinsmen Club of Edmonton has allocated a sum of money, which is intended to help charitable organizations achieve this goal through their initiatives.

All organizations requesting monies from the Kinsmen Club of Edmonton will have to provide a completed application. Please be advised that funding will not be provided to initiatives with a specific religious or ethnic focus. Below you will find some of the criteria that the Kinsmen Club of Edmonton will use in order to select initiatives that best keep with our goal of ***Serving the Communities Greatest Needs***:

1. Your initiative must not be part of a charity supported by or a donation to projects that the Kinsmen Club of Edmonton already supports either on a national or local level.
2. The Kinsmen Club of Edmonton supports initiatives, not individuals raising money for these initiatives or causes.
3. We cannot provide funds, which would sponsor an event.
4. Groups and or initiatives must be not for profit.
5. Applicants must demonstrate how their initiative fits with the goals of Kinsmen Club of Edmonton; ***Serving the Communities Greatest Needs***.
6. Organizations or groups must be willing to apply for other applicable grants.
7. A completed application form must accompany all requests.

Thank you for your interest in the Kinsmen Club of Edmonton and your application for funding. If your initiative goals match those of our organization and the funds allow, we would be more than happy and willing to assist you in the good work that you do.

Serving the Communities Greatest Needs



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Community Services Committee Initiative Request Application

PART I: Organization Information

Name of Organization: _____

Address: _____

Phone Number: _____

What is the primary focus of your organization: _____

Type of Organization: (Incorporated / Act Registered Under) _____

When was your organization founded? _____

Does your organization have current audited financial statements that are available upon request? _____

Please attach a list of the Board members, positions held and phone number.

PART II: Contact Information

Name: _____

Phone Number: _____ Fax: _____

E-mail: _____

Secondary Contact Person:

Name: _____

Phone Number: _____ Fax: _____

E-mail: _____

PART III: Initiative Profile

Please provide a one-sentence description of your initiative: _____

Please **attach a detailed explanation** of the initiative for which the Community Service funding is requested and how this initiative will benefit the Communities Greatest Needs. Please be sure to include your key initiative objectives (Objectives should be specific, measurable, actionable, and result and time bound.)

Are you requesting support from any other organizations? _____

If your request is financial, what amount are you requesting? _____

If your request is larger than \$1000.00, please attach a detailed budget for the initiative.

Would you be willing to make a presentation to the Kinsmen Club of Edmonton in support of this application? _____

PART IV: Declaration

I DECLARE THAT:

- **I AM A DULY AUTHORIZED REPRESENTATIVE HAVING LEGAL AND/OR FINANCIAL SIGNING AUTHORITY FOR THE ABOVE ORGANIZATION.**
- The information contained in this application and supporting documents is true and accurate and endorsed by the above organization.
- The initiative will benefit the general public.
- An accounting of spending, showing compliance with conditions of the grant shall be provided upon completion of the initiative or no later than two years from the date of the initiative cheque.
- Any funds awarded shall be used solely for the purposes stated within this application.
- As a condition of accepting financial assistance, access to all financial statements and records having any connection with monies received is hereby granted to the Kinsmen Club of Edmonton Community Services Committee.
- **The contribution from the Kinsmen Club of Edmonton for the initiative will be recognized.**

_____ Signature	_____ Title	_____ (Yr/Month/Date)
Mr./ Mrs./ Ms. _____ (Print Name)	First Name _____ Surname _____	_____ E-mail Address
Phone numbers: Work: (____) _____		Home: (____) _____

Please keep a copy of this initiative application for your reference.

Please forward completed applications to:

Kinsmen Club of Edmonton
Community Services Committee Chairman
Box 103, 9100 Walterdale Hill
Edmonton, AB T6E 2V3