DISTRICT OF
Logan Lake
Discover Our Nature

PO Box 190, #1 Opal Drive
Logan Lake, BC V0K 1W0
T: 250-523-6225 F: 250-523-6678
E: cforsyth@loganlake.ca

GRANT-IN-AID APPLICATION

IDENTIFICATION OF APPLICANT		
Organization Name:		
Mailing Address:		
Years in Operation:	Society Registration Number:	
Contact Person:	Title:	
Address:		
Phone No:	Fax No:	Email:

Name and phone number of two other officials in organization

1. Name: _____ Title: _____ Phone No: _____	2. Name: _____ Title: _____ Phone No: _____

GRANT INFORMATION	
Amount Requested:	Grant Category:

REASON FOR REQUEST

Describe in detail the purpose of the Grant-in-Aid request and how the community will benefit.

Please provide other information that may be pertinent to your application.

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DOCUMENTATION REQUIRED (please provide copies of the following)

Most Recent Financial Statement ☐ Most Recent Detailed Budget ☐

Proof of Not-for-Profit in good standing ☐

DECLARATION

The information contained in this application is true and correct to the best of my knowledge.

Name (please print):	Title:
Signature:	Date:

OFFICE USE ONLY

Approved: ☐ Not Approved: ☐

Notes:

1. Application for Grant-in-Aid must be received on or before March 31st.
2. Grant-in-Aid Applications are to be submitted to: District of Logan Lake, #1 Opal Drive, PO Box 190, Logan Lake, BC V0K 1W0, Attention: Finance Department.
3. More information may be requested and, where necessary, applicants may be requested to make a presentation on their application at a Council Committee meeting.
4. Not-for-profit groups who have received a discounted rate for rental of District facilities through bylaws are not eligible for further discounts through this Program.