**Schedule ‘B’ to By-law No. 2019-31

Municipality of Tweed**

**EVENT SPONSORSHIP APPLICATION FORM**

1. Applicant/Organization Information:

Applicant/Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Website: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position In Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mission Statement/Statement of Purpose:
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a) Is your organization based in the Municipality of Tweed? Yes / No
b) Is your organization not-for-profit? Yes / No
 Not-for-Profit Incorporation Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
c) Is your organization volunteer? Yes / No
d) How many years has your organization been in operation? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
e) What services or activities does your group provide to members of the Tweed community?
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2. Event Information:

Name of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Description of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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Date of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Attendance Projections of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

No Charge: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Event Admission Fee: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Event Budget Attached: Yes / No

Event Partners (if applicable):

Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Funding Amount Requested: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

In-kind Service: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous Year Received: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Details of how funds will be expended:

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4. Additional Information – Any additional information which you would like to provide.

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5. If successful, indicate the recognition opportunities and other benefits included in the sponsorship:

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 **Community Event Sponsorship
Applicant Declaration and Acceptance of Conditions**

|  |  |
| --- | --- |
| **Applicant Name:** |  |
| **Address:** |  |

1. In the event that the funds allocated are not used as described in the application, or if there are misrepresentations in the application, the amount of the financial assistance will be re-payable forthwith to the Municipality.

2. If there are any changes to the application subsequent to approval, the applicant will notify the Municipality for review and determination if the changes are within the scope of the original application.

3. The applicant will make or continue to make attempts to secure funding from other sources aside from the Municipality of Tweed.

4. The applicant will keep proper books of accounts of all receipts and expenditures relating to the event described in the application.

5. The applicant will retain and make available for inspection by the Municipality or its auditors all records and books of accounts of the organization/recipient upon request from the Municipality (which may be made within two years of the grant award).

6. If the event proposed in the applicant’s application is not commenced, or is not completed and there remain municipal funds on hand, of if the event is completed without requiring the full use of the municipal funds, such funds shall be returned to the Municipality.

7. The applicant agrees that the event shall not be represented as a Municipal event, without prior approval and that the applicant does not have the authority to act as an agency of the Municipality in any way, the only relationship being that the Municipality has approved and granted financial assistance to the applicant.

8. Upon request, the applicant agrees to provide the Municipality a year end summary confirming the financial assistance provided by the Municipality was used for the event as described in their application. Failure to provide such documentation when requested will rule the applicant ineligible for further financial assistance under this program.

9. The sponsorship recipient shall indemnify and hold harmless the Municipality of Tweed against any claims, costs, causes of action, fines or any other losses or other penalties the Municipality of Tweed suffers related to the giving and usage of the grant to the grant recipient.

We certify that, to the best of our knowledge, the information provided herein is accurate and complete and is endorsed by the Organization, which we represent.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature:** |  | **Signature:** |  |
| **Name:** |  | **Name:** |  |
| **Title:** |  | **Title:** |  |
| **Date:** |  | **Date:** |  |