CKNS Grant Application Form

Event Details

Name of event:_____

Date(s) of event: _____

Location of event:_____

Contact Information

Name of group requesting grant: _____

Joint Stock registration number:_____

Primary Contact Information (e-mail and phone #): _____

_____

Name on Cheque if application successful: _____

Mailing Address:_____

_____

Grant Request Information

You must answer all parts of the questions. If the questions do not apply to your grant application you must state that it is not applicable. Please attach your answers on a separate page or pages. You also need to include documentation as described in the CKNS Grant Application Information doc.

1. Describe how your request fits with CKNS's goal to increase participation in recreational paddling in Nova Scotia.
2. Describe how your grant request provides opportunities for children/young adults and minority groups (immigrants, women, people with disabilities, low income individuals/students)
3. Describe how this grant application involves Paddle Canada, include any certifications that would be obtained by participants.
4. List any and all certifications/professional experience held by coaches/instructors/event leaders. Also, if possible, list their demographics (M/F or other, country/province or origin, age)
5. Describe what types of paddling craft will benefit from this grant application.
6. List all other sponsors and affiliated organizations.
7. Has this event been run in previous years? If so, how many participants registered and what were their demographics? (M/F or other, country/province of origin, age)
8. How many registered participants do you expect? What is the registration fee?

Agreement to provide Final Report

I agree to provide a CKNS Grant Final Report Form within 90 days of the event date, or completion of the grant application outcomes. I will include a final Profit and Loss and in the event of profits from the event I agree to reimburse CKNS all profits, up to the total grant amount.

Name (printed): _____ **Date:** _____

Signature: _____