

# Everyone Can Play Fund Criteria and Application Form

## Criteria:

1. Applicants must be a registered not for profit and/or charitable organization, or provide programs/services, that support disabled individuals.
2. Grant: A maximum grant amount of \$1,500 per booking may be applied (this will be provided in the form of a fee assistance on your booking).
3. Funding Condition: If approved, the applicant must send a letter to CRCPS, ATT: The Everyone Can Play Fund Program, within fifteen (15) days of using the Park outlining the number of people involved, ages, benefits received and whether the subsidy was important to the success of their program/event. All funded programs will require a valid booking form.

## Applicant Information:

Legal Name of Organization: \_\_\_\_\_

Organizations Website (if appl.): \_\_\_\_\_

Contact Information - Legal Address of Organization/Phone Number/Fax Number:

Contact Person (Phone and Fax if different than above) and Email Address:

Date Organization Incorporated: \_\_\_\_\_ Incorporation Number: \_\_\_\_\_

Charitable Business Number (if appl.): \_\_\_\_\_ Number of Employees: \_\_\_\_\_

Number of Volunteers: \_\_\_\_\_ Annual Budget (Gross): \_\_\_\_\_

Organization's Revenue (% breakdown):

Government: \_\_\_\_\_% Fundraising: \_\_\_\_\_% User Fees/Programs/Services: \_\_\_\_\_%

Your Mission Statement:

Outline below ALL Your Needs From A Booking Perspective (i.e. areas of the Park you want to book, dates and time, etc – This will help us determine the value of your booking and in the production of a booking form.). **ALSO NOTE IF YOU NEED TRANSPORTATION AND/OR FINANCIAL ASSISTANCE FOR TRANSPORTATION.**

\_\_\_\_\_  
Print Name of Applicant Representative

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Signature of Applicant Representative

(Signature denotes your agreement to the "Funding Condition" noted above.)

THANK YOU for applying to our Everyone Can Play Fund. We will contact you within two (2) business days of receiving your application. If approved, a booking form will be generated to confirm your booking.

**CRCPS Office Use ONLY**

**Approved (initial):**

**Amount:**

**Date Approved:**