



APPLICATION FOR A GRANT IN AID

Name of organization: _____

Mailing address: _____

Contact person: _____

Title: _____ Telephone Number: _____

Email Address: _____

Amount requested: _____

Total budget: _____

Other sources of funding: _____

Describe your organization. Include a short history of your organization and briefly describe its goals and objectives (attached a separate sheet if necessary).

Event description: _____

Please describe how event will be open to the general public?

How do you intend to publicize your event?

Are there other similar events going on in the City? Yes _____ No _____

Authorized Signature

Please return this application to Administration, City Hall, 4705 – 50 Avenue, Mailing Address Box 6210, Wetaskiwin, Alberta, T9A 2E9, or [to administration@wetaskiwin.ca](mailto:administration@wetaskiwin.ca).