



# Registration and Grant Application Forms

*"We give here, because we live here."*

[www.quesnelfoundation.ca](http://www.quesnelfoundation.ca)

PO Box 4158, Quesnel, BC V2J 3J2 P: 250-985-1612

Version 1.0 2022 01 03

## Registration

Date (YYYY-MM-DD): \_\_\_\_\_

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

Year Organization Established (YYYY): \_\_\_\_\_

Type of Not for Profit (Circle): *Not for Profit* or *Enterprising Not for Profit*

Not for Profit Type (Circle): *Registered Society* or *Register Charity* or *Indigenous Band* or *Not Registered*

Not for Profit Registration Number: \_\_\_\_\_

Number of Board Members: \_\_\_\_\_ Number of Staff: \_\_\_\_\_ Number of Members: \_\_\_\_\_

Number of Individuals Supported Annually: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Organization Phone Number: \_\_\_\_\_

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

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

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

Main Contact Person Title: \_\_\_\_\_

Main Contact Person Phone: \_\_\_\_\_

Main Contact Person Email: \_\_\_\_\_



## Registration and Grant Application Forms

*"We give here, because we live here."*

[www.quesnelfoundation.ca](http://www.quesnelfoundation.ca)

PO Box 4158, Quesnel, BC V2J 3J2 P: 250-985-1612

Version 1.0 2022 01 03

### Registration *continued*

Board Chair Name: \_\_\_\_\_

Board Chair Phone: \_\_\_\_\_

Board Chair Email: \_\_\_\_\_

Treasurer Name: \_\_\_\_\_

Treasurer Phone: \_\_\_\_\_

Treasurer Email: \_\_\_\_\_

Main Staff Member Name: \_\_\_\_\_

Main Staff Member Phone: \_\_\_\_\_

Main Staff Member Email: \_\_\_\_\_

Vision Statement (concise)

Mission Statement (concise)



## Registration and Grant Application Forms

*"We give here, because we live here."*

[www.quesnelfoundation.ca](http://www.quesnelfoundation.ca)

PO Box 4158, Quesnel, BC V2J 3J2 P: 250-985-1612

Version 1.0 2022 01 03

### Registration *continued*

Values (list)

Main Purpose of the Organization (concise)

Important Documents (if available)

- ◇ Balance Sheet
- ◇ Income Statement
- ◇ Business Plan
- ◇ Reviewed or Audited Financial Statements

I have completed, read, agree to Freedom of Information Laws, and believe the information provided is accurate:

Signature: \_\_\_\_\_ Name: \_\_\_\_\_

Date (YYYY-MM-DD): \_\_\_\_\_



## Registration and Grant Application Forms

*"We give here, because we live here."*

[www.quesnelfoundation.ca](http://www.quesnelfoundation.ca)

PO Box 4158, Quesnel, BC V2J 3J2 P: 250-985-1612

Version 1.0 2022 01 03

### Grant Application

Date (YYYY-MM-DD): \_\_\_\_\_

Estimated Start Date (YYYY-MM-DD): \_\_\_\_\_

Estimated End Date (YYYY-MM-DD): \_\_\_\_\_

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

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

Project Contact Person Title: \_\_\_\_\_

Project Contact Person Phone: \_\_\_\_\_

Project Contact Person Email: \_\_\_\_\_

Project Title: \_\_\_\_\_

Project Category (circle): *Arts or Education or Environment or Recreation or Social Programs or Other (specify):* \_\_\_\_\_

Project Description (concise)



## Registration and Grant Application Forms

*"We give here, because we live here."*

[www.quesnelfoundation.ca](http://www.quesnelfoundation.ca)

PO Box 4158, Quesnel, BC V2J 3J2 P: 250-985-1612

Version 1.0 2022 01 03

### Grant Application continued

#### Project Plan and Details

*(concise as possible: ownership of assets, rationale, goals, actions, partners, evaluation, impacts, business case)*

Number of People Impacted by the Project: \_\_\_\_\_

Individuals or Groups that will benefit from the Project (concise)

Name of Organization's Signing Authority 1: \_\_\_\_\_

Name of Organization's Signing Authority 2: \_\_\_\_\_

Project Funds Requested: \$\_\_\_\_\_

In-Kind Contributions: \$\_\_\_\_\_



# Registration and Grant Application Forms

*"We give here, because we live here."*

[www.quesnelfoundation.ca](http://www.quesnelfoundation.ca)

PO Box 4158, Quesnel, BC V2J 3J2 P: 250-985-1612

Version 1.0 2022 01 03

## Grant Application continued

### Cash Revenue Sources for the Project

*(Status: In-trust, pending, in application process)*

Source	Amount	Status
Total	\$	

### Cash Expenses for the Project

*(Status: confirmed, waiting for quotes)*

Source	Amount	Status
Total	\$	

### Important Documents (if available)

- ◇ Quotes
- ◇ Support Letters or Emails
- ◇ Additional Project Planning Information

I have completed, read, agree to Freedom of Information Laws, and believe the information provided is accurate:

Signature: \_\_\_\_\_ Name: \_\_\_\_\_

Date (YYYY-MM-DD): \_\_\_\_\_