



Recreation & Cultural Services  
 Sport Kelowna Centre  
 645 Dodd Road  
 Kelowna, BC V1X 5H1  
 250 469-8504

# Sport Event Development Grant Application

## ORGANIZATION INFORMATION

Organization Name:	
Contact Name:	Position:
Phone (Work):	Phone (Home):
Email:	Fax:
Mailing Address:	
BC Society #: (if not, describe organization's non-profit status)	
Date Organization was established:	

## EVENT INFORMATION

Name of Event:
Date of Event:
Location of Event:
Event Description (50-100 words):

## FUNDING REQUEST

Total \$ Revenues projected for the event:
Total \$ Expenses projected for the event:
Grant funding amount requested:
Intended use of the Event Development Grant:
<input type="checkbox"/> Bid preparation & presentation <input type="checkbox"/> Bond or holding fees <input type="checkbox"/> Start-up costs <input type="checkbox"/> Facility & equipment legacy <input type="checkbox"/> Operating expenses <input type="checkbox"/> Matching funding <input type="checkbox"/> Hosting AGM Other:
What other sources of funding/revenues are you pursuing?
Has your organization received a Sport Event Development Grant before? For what event?

**EVENT & PARTICIPANT DETAILS**

If applying for bid support, what is the deadline date for the bid submission:	
Has this event been secured/confirmed?	Is the event venue booked?
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
What is the expected total number of local participants? (coaches, officials, players)	What is the expected total number of out-of-town participants travelling from over 80 km away? (coaches, officials, players)
What is your current volunteer base and describe how this event will be managed?	
What is the number of nights participants will be staying in Kelowna?	
The event type is:	
<input type="checkbox"/> Invitational <input type="checkbox"/> Provincial <input type="checkbox"/> National <input type="checkbox"/> International	
What governing body sanctions this event? Contact person?	
Describe general media coverage expected for this event:	
<input type="checkbox"/> Radio <input type="checkbox"/> Newspaper <input type="checkbox"/> TV <input type="checkbox"/> Other _____	
Explain:	
How will the community of Kelowna benefit from this exposure?	
If you are successful in receiving support from the Sports Event Development Grant, how will your organization recognize the City of Kelowna in promotional materials/efforts?	
Describe the potential the sport or tournament might realize in subsequent years of operation, if applicable.	
In the event this sports event realized a financial surplus, describe how that surplus could be used to benefit the community?	
Please comment on any other event needs (accommodation, transportation, event kit, volunteers)	

**STATEMENT**

I declare the information in this application is accurate.

**Representative Completing this form:**

Name (print):	Address:	Signature:	Date:

**Two Board Members of the Organization:**

Name (print):	Address:	Signature:	Date:

Please complete the application form and submit to:

**Sport Kelowna Centre**  
 Attention: Athletic Excellence Review Team  
 645 Dodd Road Kelowna, BC V1X 5H1  
 Fax: 250 862-3327

**BUDGET**

Revenue	Projected	Actual
<b>Earned Revenue</b>		
Registration fees		
Concession sales		
Fundraising (gross)		
Donations		
Other		
<b>Grants</b>		
Event development funds		
Provincial funds		
Federal funds		
Other		
<b>Total Revenue (Line A)</b>		

Expenses	Projected	Actual
<b>Operating</b>		
Salaries		
Rent		
Insurance		
Accounting		
Office supplies/equipment		
Postage/freight		
Telephone		
Other		
<b>Event</b>		
Officials fees		
Officials travel		
Venue rental		
Venue preparation		
Publicity/promotion		
Fundraising expense		
Concession - cost of sales		
Security		
Traffic Control		
Honoraria		
Other		
<b>Total Expenses (Line B)</b>		

Difference between Revenues & Expenses		
Grant Application Amount		