



KIN Canada
Serving the Community's Greatest Need

The Kinette Club of High River

KINETTE CLUB FUNDING APPLICATION

Requests up to \$1,000

Deadline for Application: June 1, 2012

The Kinette Club of High River is a service organization made up of women who are dedicated to helping others in our community and surrounding areas. Our motto is "Serving the Community's Greatest Need", and to that end Kinsmen and Kinette clubs across Canada have been raising money for Cystic Fibrosis research and local organizations for more than 80 years.

The focus of the Kinette Club Funding will be to support local community groups or individuals in the Foothills area. You are invited to submit the application below for consideration. Please fill it out completely and mail to Kinette Club of High River, 50 – 3rd Avenue, PO Box 45086, High River, AB T1V 1R0 or fax to 403-601-2740. Should you have any questions or concerns, please email hrkinettes@shaw.ca.

Full legal name (or legal name of your organization):

Contact names (President, Treasurer, Project Organizer, etc. if applicable):

Full mailing address with postal code, telephone, fax, e-mail:

Mandate / Mission Statement (if applicable):

What services does your organization provide (if applicable)?

Have you qualified for or received funds from a casino within the past 3 years? (This does not necessarily exclude you or your organization from consideration.)

Please indicate the amount that you are requesting - \$

Please itemize below how this money will be used. (If the funding requested in this application is approved the funds must be spent solely for the project / activities / expenses that you indicate here.)

Are you willing to make a presentation to the Kinette Club of High River (date and time to be determined) to tell us more about your application and how we can help?

Are you willing to be available for photo opportunities such as cheque presentations for publication in local newspapers?

As a service organization, the Kinette Club of High River depends on fundraisers and donations to raise the money that we, in turn, put back into the community. In what way could you or your organization help to spread the word about our organization and what we do?

Please have 2 members of your organization's Executive (or 2 sponsors for individual applicants) sign and date this application.

Name (please print):

Signature:

Position on executive:

Date:

Name (please print):

Signature:

Position on executive:

Date:

Applicant's Signature:

Date:

Thank you for your application. We will be in contact to inform you whether your application is approved or if we require more information.