



# 2017 Sport Development Grant Application Form



**Application due: May 5th at 4:30p.m.**

**Mail to:** SPORT OAKVILLE Development Grant Review Committee  
Town of Oakville, c/o Department of Recreation & Culture  
Box 310, 1225 Trafalgar Road, ON L6J 5A6

**Fax:** 905-338-4188

**Email application and/or request assistance:** info@sportoakville.ca

## Applicant Information

Name of Organization	_____	Date	_____
Mailing Address	_____ _____		
Application Submitted by	_____	Position	_____
Contact (if different )	_____	Position	_____
Telephone (Day)	_____	(Eve)	_____
Fax	_____		
Email	_____		

## Project Description

Project Title:	_____		
Project Timing: When is it occurring	_____	When are receipts ready	_____
Project General Description - (Training - provide course/level , # participants) (Equipment - provide item description, usage/purpose)	_____ _____ _____ _____ _____		

**Project Budget**

Item or Program	Qty	Detail Description	Amount\$
Amount Requested from Sport Development Grant Fund (maximum allowed \$3,000):			\$

<b>FOR OFFICE USE ONLY</b>	
Date Received _____	Date Reviewed _____
Approved Amount \$ _____	Committee Chair Signature _____
Rationale _____	