



TOWN OF DRAYTON VALLEY

ROGER COLES MEMORIAL YOUTH SPORT GRANT

FINAL REPORT FORM

Date of Final Report: _____

Type of Sporting Event/Program: _____

Name: _____

Mailing Address: _____

Contact Name: _____ Title: _____

Email: _____ Telephone: _____

EVENT INFORMATION

Name of Event: _____ Event Location: _____

Event Date: _____ to _____ Estimated # of participants/audience _____

REQUIRED ATTACHMENTS

1. An official letter from the appropriate organization, which verifies the date(s) and location of the event and acknowledges that Applicant as a participant or competitor. This letter should also contain the organization's address, phone number, fax number, and name of the contact person.
2. Proof of participation in the event.
3. Proof of travel costs (receipts indicating the name of payee) as provided by commercial airline, train or bus company, or fuel receipts, being used as a means of transportation to the event, and mileage from town centre to event location.
4. Present a report of all expenses associated with attending the event (including travel, lodging, meals, registration fees, and other incurred expenses).
5. Present a report of all revenues secured in order to attend the event (including a list of all personal contributions, sponsorship, or funding requested and obtained from other sources).
6. Poster or brochure of event/activity/program if available.
7. In what ways did you acknowledge the Town of Drayton Valley's financial contribution? (Attach copies of any promotional materials on which the Town's logo was included).
8. A brief paragraph stating what the impact of the athlete's participation in the event was and how the participant has benefitted by attending?

FINANCIAL INFORMATION

REVENUES

Monies contributed by Applicant/Organization: \$ _____

Monies earned through sponsorships, donations and/or fundraising excluding all government support funding: \$ _____

Monetary value of gifts in kind received: \$ _____

Specify all Federal, Provincial and/or Municipal Government support received:

\$ _____ Grant/Program Name: _____

\$ _____ Grant/Program Name: _____

\$ _____ Grant/Program Name: _____

Specify the monetary amount from all other funding sources: \$ _____

Total Revenues: \$ _____

EXPENSES

Travel by Air*: \$ _____

Oversized Baggage (only if required for participation in event): \$ _____

Travel by Bus or Train*: \$ _____

Travel by Personal Vehicle**: \$ _____

Specify all other Expenses:

\$ _____ Description: _____

\$ _____ Description: _____

\$ _____ Description: _____

\$ _____ Description: _____

* Travel expenses must be supported by attachment of paid invoices or receipts.

** Please verify the distance from town centre to your travel destination event location with the Alberta Motor Association or Travel Alberta. Maximum grant amounts also apply to mileage.

Total Expenses: \$ _____

BY AFFIXING HIS/HER SIGNATURE BELOW, THE APPLICANT CONFIRMS THAT THE FOLLOWING STATEMENTS ARE TRUE, TO THE BEST OF HIS/HER KNOWLEDGE.

1. The information provided is accurate.
2. The signature below is that of the registered director, board member or designate of the organization or applicant, parent or guardian (for an applicant under the age of 18) receiving sponsorship.
3. I understand and agree that this Final Report for municipal sponsorship or any information related thereto is not confidential information and may be released by the Town of Drayton Valley.
4. Applicant is 18 years of age or younger.

Applicants Signature: _____ Date: _____

Dependent Name (if applicable): _____

MAIL TO:

Town of Drayton Valley
Roger Coles Memorial Youth Sport Grant
Box 6837
Drayton Valley, AB T7A 1A1

DELIVER TO:

Town of Drayton Valley
Roger Coles Memorial Youth Sport Grant
5102 - 52 Street
Drayton Valley, AB

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY (FOIP) STATEMENT

The personal information on the Roger Coles Memorial Youth Sport Grant Application is being collected under authority of Section 33(c) of the *Freedom of Information and Protection of Privacy (FOIP) Act* and will be used to administer Grant Funding. The Town of Drayton Valley will use the aggregate data for program planning and evaluation. All personal information will be protected in accordance with the privacy provision of the *FOIP Act*. If you have any questions about the Grant or questions about the collection, use or disclosure of our personal information, please contact the Town of Drayton Valley at (780)514-2200.