



VOLLEYBALL NUNAVUT
PO BOX 208
IQALUIT, NU X0A0H0
867-222-9004
informationvbnu@gmail.com

VBNU COMMUNITY EVENT GRANT

GRANT APPLICATION

EVENT INFORMATION:

Name of Event:			
Date(s) of Event:			
Location of Event:			
Organizer Contact Name:			
Phone #:		Email:	
Mailing Address:			

EVENT DESCRIPTION:

Describe the Event (50-100 words):	
Has the date been confirmed? Yes No	Is the event venue booked? Yes No
What is the expected number of participants? (Coaches, Officials, Athletes)	How many communities will be involved?
Is there a committee to help host this event?	Yes No
List the names of committee members:	
How will the event be promoted?	
If event is successful in receiving support from the VBNU Community Events Grant, how will your event recognize Volleyball Nunavut?	



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FUNDING REQUEST INFORMATION:

Total \$ Revenues projected for the event:			
Total \$ Expenses projected for the event:			
Grant funding amount requested: (Circle)			
\$2000			
What will the VBNU Community Event Grant be used for?			
Equipment	Referee Costs	Prizes	Operating Costs
<small>*VBNU Community Event Funding cannot be used for prize money.</small>			
What other sources of funding/revenues are you pursuing?			
Has your organization received a Sport Event Development Grant before? For what event?			

STATEMENT

I declare the information in this application is accurate

Representative Completing this form:

Name (print):	Address:	Signature:	Date:

Two committee members of the event:

Name (print):	Address:	Signature:	Date:

Please complete the application form and submit to:

VBNU Community Event Grant
 Volleyball Nunavut
 Email: informationvbnu@gmail.com
 Fax: 250-984-7600
 Phone: 867-222-9004