



## **Kiwanis Club of Olds**

**Kiwanis is a global organization of volunteers dedicated to changing the world one child and one community at a time.**

The primary purpose of the Kiwanis Club of Olds is to improve the quality of life for children and families in our community by giving children the chance to learn, experience, dream, grow, succeed and thrive.

### **FUNDING APPLICATION**

**Requests for funding will be reviewed based on the following:**

- non-profit organizations
- projects with an orientation to youth
- projects that involve a group
- projects that enhance the quality of life for people who live in our community
- projects that involve membership in service and volunteering
- recognize the Kiwanis Club of Olds contribution

**Requests that will not be considered:**

- direct religious and political activities
- projects in support of individual endeavors
- operating expenses & regular staff wages

**Organizations requesting funding may be asked to make a presentation to the Kiwanis Club and provide a financial statement.**



## Kiwaniis Club of Olds – Funding Application

Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Describe your project: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What is the target group for this project? \_\_\_\_\_

\_\_\_\_\_

How many people will this project impact? \_\_\_\_\_

\_\_\_\_\_

What is the total funding request? \_\_\_\_\_

What is the total funding goal? \_\_\_\_\_

How will Kiwanis be recognized for their support? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

By what date would you like to receive funding? \_\_\_\_\_

Please submit your application to:

Kiwaniis Club of Olds  
Box 3733  
Olds, AB T4H 1K2  
or  
funding@oldskiwaniis.org