

Festival & Community Event Development Program (Note to applicants using Mac OS systems: please ensure that you complete the form using the free Adobe Acrobat Reader (<u>https://get.adobe.com/reader/</u>). Right click or option-click and select Adobe Reader to open the file. If you complete the form in Preview mode the information on the form will not save or print correctly.)

Application Deadline: April 15th

APPLICANT INFORMATION							
Name of Applicant Organization *							
Street Number *	Street Address*	reet Address*				Suite	
PO Box	City/Town *	Count	County * Province *			Postal Code *	
Email *			Website				
Twitter			Facebook				
Event Name							
REGISTRATION	INFORMATION						
Is your organization registered with the Nova Scotia Registry of Joint Stocks as a non- profit society or non-profit cooperative? * No					No		
If yes the above question, please provide your Nova Scotia Registry of Joint Stocks Registration Number.*							
Identification Number (Canada Revenue Agency)							
CHAIRPERSON			APPLICATION CONTACT				
Chairperson *			Contact Nam	e			
Telephone (Primary) *		Telephone (Primary)					
Telephone (Alt)		Telephone (Alt)					
Fax			Fax				
Email *		E-Mail					

ELIGIBILITY CONFIRMATION (Please select all that apply) *

The event is not a fundraiser

The event is not political or religious in nature

The event is not for a league, club, social club, sports training camps or tournaments

The event is not solely an artisan or craft fair, tea or supper

This is the only application for funding from your organization (please see "Applicant Eligibility" in the Program Guidelines.

PROJECT/EVENT INFORMATION

Brief Project Description / Name *

	Project End Date *		
Total Project Cost *		Total Event Bu	dget *
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PROJECT INFORMATION

Please provide a brief overview of the event or festival.

Please describe how the festival or event promotes or strengthens the unique character of the community.	
How many participants, volunteers, spectators, VIPs and media do you typically have attend your event? Participants (organizing committee, performers, etc.)	
Volunteers	
Spectators	
VIPs (includes sponsors, government officials, etc	
Media (local)	
Media (national/international)	
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What methods do you use to track attendance and participation at your event, like ticket sales or a survey? Could
you add additional methods for tracking these numbers?
How doos your event support Covernment's Culture Action Plan? (Please see link to plan at
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What does success for your festival or event currently look like?	How do you measure the success of your festival or
event?	

FUNDING PURPOSE The purpose of this fund is to help you increase the <u>viability</u>, <u>sustainability</u> or <u>capacity</u> of your festival or community event.

What does your event need to succeed? To grow? To attract more participants/spectators/sponsors/volunteers? What does your event need to become self-sustaining and increase its viability? Please explain why you are requesting the funding and exactly how it will help achieve one or more of the objectives of this program. Be as specific and concise as possible.

How will success of the funding purpose measured? (Please keep in mind this measurement will need to be quantifiable, so you will need to be able to identify the baseline as well as the improvement gained by implementing this initiative.)

Is the reason for the funding request part of a multi-year plan to increase viability, sustainability, or capacity of your festival or event? Please explain.

While you are required to submit a detailed budget as part of this application? Please explain / outline how the money being requested will be spent.

FESTIVAL / EVENT BUDGET

I am attaching a <u>detailed budget</u>, including revenues and expenses, a complete breakdown of what the requested funding will be used for and a <u>statement</u> outlining how any profits in excess of 20% of the total budget will be allocated.

CONTACT US		
Send Materials to:	For further information:	
Culture and Heritage Development Division Department of Communities, Culture & Heritage PO Box 456 Halifax, NS B3J 2R5	Angela Dennison Telephone: (902) 424-3876 Email: <u>Angela.Dennison@novascotia.ca</u> Fax: (902) 424-0710 Web : <u>www.novascotia.ca/cch</u>	

CONSENT

I consent to the sharing of my information with other government departments, organizations or contractors that the Department of Communities, Culture and Heritage (including African Nova Scotian, Acadian and Gaelic Affairs) or Arts Nova Scotia has a data sharing agreement with.

I consent to the Department of Communities, Culture and Heritage (including African Nova Scotian, Acadian and Gaelic Affairs) or Arts Nova Scotia adding my name, mailing address and e-mail to a distribution list to receive updates on programs, services, news and events.

DECLARATION

As an individual applicant:

- I have carefully read the application guidelines and eligibility criteria for this program, and confirm that I meet the eligibility criteria.
- I am aware that all overdue final reports, where applicable, for previously funded applications must be submitted and approved before any additional requests or applications for funding can be considered.
- I understand that my current application may not be eligible if any of my final reports have not been submitted and approved.
- I am aware that information I have provided in this application form is subject to the *Freedom of information and Protection of Privacy Act*, and any request for my personal information requires my written consent before it can be shared with a third party.

As a representative of an organization, consortium or group (including ad-hoc group):

- I have carefully read the application guidelines and eligibility criteria for this program, and confirm that the organization, group (including ad-hoc) or consortium I represent meets the eligibility criteria.
- I am aware that all overdue final reports, where applicable, for previously funded applications must be submitted and approved before any additional requests or applications for funding can be considered.
- I understand that my current application may not be eligible if any of my final reports have not been submitted and approved.
- I will act as the representative of the organization, consortium or group and will keep all participants informed of the application content and any funding decision.
- I have included a complete budget template with my application.

I accept all of the declaration statements above that are applicable to me as an individual application or as a
representative of an organization, consortium or group. I understand that not accepting these statements as true
will affect eligibility for this funding application.*

Signature* (see below if submitting by e-mail)	Title (if applicable)
Name (print) *	Date *