2015 Celebrate Markham Grant Application



101 Town Centre Boulevard Markham, Ontario L3R 9W3 www.markham.ca

The Council of the City of Markham recognizes the contribution of community groups and organizations in their attempt to enhance and promote the City, and is committed to building the community by celebrating the artistic and cultural uniqueness of Markham. Celebrate Markham provides funding support for not-for-profit festivals and events that promote and recognize Markham as a great place to work, live and play.

APPLICATION PREPARATION:

Be sure to review the Markham Grants and Sponsorship Guidelines before completing your application.

APPLICATION SUBMISSION PROCESS:

The completed application must be sent to the Clerks Department either via e-mail to MaryLou Papa mpapa@markham.ca or alternatively mailed to 101 Town Centre Boulevard, Markham, Ontario, L3R 9W3. Completed applications and attachments may also be hand delivered to the Clerks Counter located on the Main Floor of the Civic Centre.

Section A - APPLICATION OVERVIEW

Is your festival or celebration: 1. operating on a not-for-profit basis 2. based and active in Markham	Yes Yes					
3. how many years has the event be						
If you answered "No" to questions 1 a your eligibility for this Grant Program						
Incorporated as a not-for-profit org (If not incorporated as not-for-profit provincial requirements)	-		Yes	No		
Business Number:						
Registered Charitable Status Number	:					
Name of festival or celebration:						
Date of festival or celebration:						
Where will the event take place?						
Organizational name that cheque sho		val or colobrations)				
(Please note that cheques will be mailed to the mailing address of the festival or celebrations.)						
Briefly describe what grant funding wi	Briefly describe what grant funding will be used for:					
	,					
Grant request	\$	Total operating budget	% of operating budget			
Previous grant received from the City of Markham	\$	Year received				

Section B – OBJECTIVES, DESCRIPTION, ORGANIZATIONAL PROFILE
Please review the Grant and Sponsorship Guidelines. Answer the following questions using points form of full sentences.

B1. Mandate State the organization's mandate at the date of its founding, and detail any significant changes since that time. State its current mission and/or vision and the date that this mission or vision was adopted by your governing
body.
B2. History Give a brief history of the organization. Include the year it was founded and the reason it was created.
Provide a brief list of the organization's most significant events, with dates. Name the key leaders who have contributed to the organization's profile and describe their contributions.
B3. Organizational Structure and Leadership Briefly describe the composition of your governing body (board and committee structure). Describe the
committee/staff/volunteer structures that support your organization's vision and activities.

B4. Organizational Effectiveness Discuss in terms of the following:
Financial Accountability What were your organization's ongoing and new activities in its most recent/current fiscal year? Did everything occur as planned, or were there unanticipated changes? Please provide a critical self-assessment of these activities.
Self Assessment How do you measure the impact and effectiveness of your program in achieving your vision/mission, and in serving the community? Please provide specific measures from your most recent season (e.g. surveys, focus groups, other feedbacks).
B5. Community Impact: How is your festival or celebration beneficial to the Markham community? Be specific about how your festival or celebration contributes to the social and cultural development of Markham, partnerships that you have developed, support of local cultural practitioners, demonstrated economic benefits and increased economic activity in the City, extent of community support and volunteer opportunities. What is the impact on tourism at Markham? Please detail any proactive measure you are taking to engage communities in your programming and/or in your organization.
B6. Need for Funding from the City of Markham Explain why you need funding for this project from the City of Markham, and how this funding will further your goals and add value to your organization/project. Did you explore alternative/ increased funding support from other sources? What will happen if funds are not approved?

B7. What are you doing at the event to promote zero waste?
Please provide your waste management plan including how you will handle recyclables to adhere to the City's
zero waste policy, in particular the banning of polystyrene (foam) food containers.
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Section C - BUDGET AND FINANCIAL STATEMENT

This section is used to describe your organization's financial situation, any major changes that have affected your organization's financial stability, and how programming and organizational goals are being hampered or furthered by your financial situation.

Complete the Operating Budget Form (Section C, 3 pages) included in the Application Form. Make sure that your budget reflects the text of your application. For example, if your application states that you will hire staff to implement your project, make sure that staff salaries are included in your budget.

Fes	tival/Celebration Title:						
	janization:						
	ndicate the amount of your request in the a	appropriate s	shaded are	as			
	REVENUE	Last Year Actual (fiscal) 2013	Original Budget (fiscal) 2013	Projected Actual Year Ended (fiscal) 2014	Budget (fiscal) 2014	** Grant Request	Budget (fiscal) 2015
EAI	RNED REVENUE						
1	Admission fees						
2	Membership fees						
3	Instructional fees						
4	Concessions/merchandising						
5	Advertising income						
6	Rental fees (booth/display)						
7	Other earned revenue						
	(please specify)						
8	TOTAL EARNED REVENUE						
PUI	BLIC SECTOR SUPPORT						
	Please list all Federal, Provincial, Regiona	l and Munic	ipal public	sectors sup	port on Ch	art 2 below	
9	Dept of Canadian Heritage		pui puiciie		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
10	Other Federal (please specify)						
11	Ontario Arts Council						
12	Ontario Ministry of Culture						
13	Other Provincial (please specify)						
14	Region of York						
15	City of Markham (your request)						
16	TOTAL PUBLIC SECTOR SUPPORT						
OTI	HER SUPPORT AND FUNDRAISING	•					
	Please list all foundation support on Char	t 2 below		1			
17	Ontario Trillium Foundation						
18	Community Foundation						
19	Other foundations (please specify)						
20	Corporate sponsorship (please specify)						
21	Individual donations (please specify)						
22	Fundraising projects (please specify)						
23	Other revenue (please specify)						
24	In-kind donations (Please List on Chart 3)						
25	TOTAL OTHER SUPPORT AND FUNDRAISING						
26	TOTAL REVENUE						

Section C – 2015 OPERATING BUDGET

Fes	tival/Celebration Title:						
Organization:							
** lr	ndicate the amount of your request in the a	opropriate s	shaded are	as			
	EXPENSES	Last Year Actual (fiscal) 2013	Original Budget (fiscal) 2013	Projected Actual Year Ended (fiscal) 2014	Budget (fiscal) 2014	** Grant Request	Budget (fiscal) 2015
PR	OFESSIONAL SERVICES						
27	Artist and performer fees and honoraria (provide a breakdown)						
28	Performers						
29	Other services (fundraising, marketing, other, please specify)						
30	Other expenses (please specify)						1
31	TOTAL PROFESSIONAL SERVICES EXPENSES						
PR	DDUCTION						1
32	Production technical staff fees						
33	Accommodation, meals, catering						
34	Transportation and shipping						
35	Equipment rental, sound, lighting, materials and supplies						
36	Venue rental, box office, front of house						
37	Permits (specify)						
38	Ticket subscription costs						
39	City services (specify e.g., police, fire)						
40	Other (specify)						
41	TOTAL PRODUCTION EXPENSES						
MA	RKETING						
42	Marketing and promotion (specify)						
43	Merchandise						
44	TOTAL MARKETING EXPENSES						
45	MINISTRATION Admin and management salaries & wages						
46	Office rent						
47	Office supplies and equipment						
48	Volunteer management						
49	Accounting, legal services						
50	Insurance						
51	Security						
52	Janitorial						
53	Utilities						
54	Fundraising						
55	TOTAL ADMINISTRATION EXPENSES						
56	Other (please specify)						
	TOTAL OPERATING EXPENDITURES						
57	(Add lines 31+41+44+55+56)						ı
	NET SURPLUS/(DEFICIT) (Revenues						
58	less Expenditures) (line 26 line 57)						
	Grant Request % of Total Operating						
59	Expenditures (line 15 ÷ line 57)						

Please note: In cases where a deficit is indicated, please explain how your organization will make up a shortfall. Similarly, the intended use of any surplus must be explained. Explanations can be attached on a separate sheet. All amounts shown as in-kind revenue must be able to be proven with receipts if audited. When in-kind is included as revenue, it must be balanced off equally on the expenses side of the budget.

CELEBRATE MARKHAM GRANT APPLICATION Section C = 2015 OPERATING BUDGET

Г	Section C - 2015 OPERATING BUDGET				
Festival/Celebration Title:					
Org	anization:				
	CHART 1: STATEMENT OF FINANCIAL POSITION (CASH FLOW)	Last Year Actual (fiscal) 2013	Current Year To Date Actual (fiscal) 2014	Budget (fiscal) 2015	
ASS	SETS:				
60	Cash in bank				
61	Investments				
62	Accounts receivable				
63	Other assets, including tangible capital assets (please specify)				
64	TOTAL ASSETS (add lines 60+61+62+63)				
LIA	BILITIES:				
65	Accounts payable				
66	Loans				
67	Other liabilities (please specify)				
68	TOTAL LIABILITIES (add lines 65+66+67)				
RES	SERVES AND ACCUMULATED SURPLUS/(DEFICITS):				
69	Reserve funds (please specify)				
70	Prior year accumulated surplus/(deficit)				
71	TOTAL RESERVE AND ACCUMULATED SURPLUS/(DEFICITS)				
	(add lines 69+70)				
72	TOTAL LIABILITIES, RESERVE & ACCUMULATED SURPLUS /				
	(DEFICIT) (lines 68+71, should equal line 64)				
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Provide an explanation of how you have arrived at your financial projections, and explain any notable figures. If
your organization has an accumulated surplus, please explain the intended use of those funds including cash
flow requirements. If your organization has an accumulated deficit, please detail your deficit reduction plans.
Please detail any funds you have in reserves, the purpose and the administration of these funds.

CHART 2: OTHER SUPPORT		
List all other grants that you have applied for or that you are going to apply for and any relevant details :		
73		
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74		
75		
76		

CHART 3: IN KIND DONATIONS (see guidelines for definition)					
List	List details of donors and items :				
77					
78					
79					
80					
81					

Section D - GOVERNANCE

Contact Information:				
(President) Name:	Address:			
Phone:	Email:			
(Treasurer) Name:	Address:			
Phone:	Email:			
(Recorder/Secretary) Name:	Address:			
Phone:	Email:			
respect and that in the event that the funds are not used for the prefinancial assistance will be payable to the City. The organization must demonstrate the ability and determination the sector, other funders, and other levels of government. That the organization will keep proper accounts of all receipts and. The organization shall make available for audit by the City in a readocumentation for at least three years to show the receipt and dist. The organization should be available for an on-site meeting during. The organization must return to the City any funds as a direct resulfunding has been awarded. That the festival/celebration be represented as the responsibility of an agency of the City in any way, the only relationship being that the organization. All groups or organizations receiving a City grant must acknowledge signage must be present (to be provided by the City). The organization must not dispose of any surplus City funds without one organization must not fix the City of any conflict of interest situates to seek legal counsel or may be the subject of media attention. The organization must provide a copy of the certificate of insurance. Two million dollars of commercial general liability insurance. Name the Corporation of the City of Markham as an additional incention. Full participant coverage. We accept the Terms and Conditions that relate to the above, and certify that to the best of our knowledge, the complete and is endorsed by the organization we represent the complete and is endorsed by the organization we represent the complete and is endorsed by the organization we represent the complete and is endorsed by the organization we represent the complete and is endorsed by the organization we represent the complete and is endorsed by the organization we represent the complete and is endorsed by the organization we represent the complete and is endorsed by the organization we represent the complete and the province and the	n its application for financial assistance are true and correct in every oject or programs as described in the application, the full amount of the hat it has explored other sources of financial support from the private expenditures, relating to the festival/celebration. Isonable time, the organization's books of accounts and supporting bursement of funds. If the funding year, if requested all of the termination of all or part of the program/activity for which City if the organization, and that the organization may not represent itself as the City has approved and granted financial assistance to the gethe funding on all promotional material. If an event is scheduled, City ut prior approval of the City, nor direct funding towards other programs ations or other contentious situations that may require the organization e, which have the following insurance coverages: sured receipt of a grant from the City of Markham detailed the financial and descriptive information provided is esent.			
President:	Date:			

Treasurer: ______ Date: _____

Secretary: _____ Date: _____

Section E – COVER PAGE AND CHECK LIST

			7		
Name of Festival:					
Name of Org	anization:				
Name of Primary Contact: Phone:					
Email:					
	Sections A to D have been completed. Section B is no longer than 8 pages. Section C – All financial information has been filled out correctly on the Operating Budget Form enclosed (3 pages) All details regarding income and expenses have been fully explained including all reserve funds and "Gifts-in-kind" donations. Section D – Contact information has been completed and members understand the terms and conditions of the grant if it is awarded. Section E – This cover page is filled out Attach a copy of the event's certificate of insurance Include any promotional materials you may have (only 1 copy of each). Note: these will not be returned.				
PROGRAM CALENDAR: List all proposed/tentative activities and events you are planning for the grant application year.					
What it is:		Date and time:	Where:		