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APPLICATION FORW. 2025 Grant in Aid

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MANDATORY: REVIEW "POLICY 4-01 COMMUNITY GRANT IN AID" DOCUMENT REVIEW "APPLICATION CHECKLIST" ON PAGE 4 OF THIS DOCUMENT		
Applicant Information		
Application Date (mm/dd/yyyy): 12122024	
Full Legal Organization Name	Merritt Crossroads Community Church	
Street Address	2990 Voght	
City	Merritt Prov BC	
Postal Code	V1K1H9	
Organization Website	www.merrittcrossroads.com	
Organization President /		
Executive Director		
Title	Lead Pastor	
Phone Number	250-378-2911 E-Mail admin@merrittcrossroads.com	
Contact Person (if different)	Naomi Westergard	
Title	Office Manager	
Dhana Numhar		
Phone Number	250-378-2911 E-Mail admin@merrittcrossroads.com	
Organization Inform	nation	
CONTROL CONTRO		
Not for profit? Yes	No Registration Number 10769 2196	
Did you receive a Permissive Tax Exemption in 2025 Yes No		
Did you receive a Grant in Aid in las (Include \$ amount of financial and/or		

Organization information	
Current Fundraising Initiatives (500 characters or less)	
Our church relies on the generosity of our membership in order to function properly. When we need to fundraise we ask them to contribute when specific needs arise.	
Mission Statement/Purpose (500 characters or less)	
Crossroads Community exists to Love God and reach the Nicola Valley.	
Brief Description of Organization (1,000 characters or less)	
We exist to serve the local community of Merritt by developing healthy families, offerings spiritual opportunities, providing religious services, and building cultural/relational bridges in our region to provide people with a safe place that gives their lives meaning and purpose.	

Please don't hesitate to <u>attach supporting documents</u> with further information about your organization.

Proposal Request
Program / Project / Event Name
Week Long Day Camp
Description of Event (1,000 characters or less)
We are planning to have a week long Day Camp in July for ages 5-12. There will be food and fun activities as well as opportunities to learn new skills in Art, Sports, Music, and Crafts. Our hope is for children to meet new friends and have a safe and fun place to go during the summer.
Some of the planned activities will be painting, choir, dance, woodworking, baking (it will depend on the volunteers/staff that we can come up with).
Please don't hesitate to attach supporting documents with details about your program, project or event.
Type of Funding Request Financial Aid In-Kind Contact Facility Booking Department at (250) 315-1050 for a quote for your event
Amount Requested 1400 Maximum of \$7,500 per organization or \$500 per teams/individuals participating in recognized competitions
Program Budget 5000
Percent of your Program Budget covered by this request 28 %
(i.e. a \$1,000 grant would cover 10% of a \$10,000 event)
Tell us how much money you have fundraised for this event. \$
Please explain how your Organization or Event plans to increase external fundraising in the future. (500 characters or less)

In the future we will be asking our members to give specifically to this event.

Declaration (Two Authorized Signatures Required)

- 1) On behalf of and with authority of the Organization, I certify that the information given on this grant application and attachments is true, correct and complete in every respect and if the Organization is awarded the grant, agrees to abide by the established grant terms and conditions.
- 2) The personal information collected on this form is done so pursuant to the Community Charter and/or the Local Government Act and in accordance with the Freedom of Information and Protection of Privacy Act. The personal information collected herein will be used only for the purpose of processing this application or request and for no other purpose unless its release is authorized by its owner, the information is part of a record series commonly available to the public, or is compelled by a Court agent duly authorized under another Act.
- 3) Neither the City of Merritt or any Member of Council, individually or collectively, is in any way responsible for any deficits or cost over-runs in relation to any event or initiative.

Print Name of Board Chair or President	Matthew Westergard	
Signature	MAGOS MATES	
Print Name of Person completing the application	Naomi Westergard	
Signature	Mhillen	
Date Signed (mm/dd/yyyy)	12 12 2024	
APPLICATION CHECKLIST - ALL REQUESTS		
2025 Grant Report - If you received a Grant in Aid in 2024 you will be required to submit a final report to Council in order to be considered for 2025 funding. This may include actual revenues/expenses, attendance, and economic/social impact of the grant.		
Completed and signed Grant in Aid application.		
APPLICATION CHECKLIST - REQUESTS OVER \$1,500		
Budget - Include a detailed budget for the program, project or event, including all potential revenue sources		
Financial Statements - include annual financial statements that are certified (signed) by a Director (or alternate) of the organization.		
Organization Budget - Include the current annual operating budget for the organization.		
Long-Term Plan - For recurring applications, please provide a business plan showing how the organization intends to become more self-sufficient and less reliant on the City Grant in Aid program in the future		