



Community Support Program Application Form

APPLY TO:

Town of BWG Grants Program
100 Dissette Street, Units 7 & 8,
P.O. Box 100, Bradford, ON, L3Z 2A7
Fax: 905-775-0153 Email: info@townofbwg.com
Info: www.townofbwg.com or 905-775-5366

Name of Organization: _____

Date: _____

Address: _____

Postal Code: _____ Website: _____

Contact Name and Title: _____

Telephone: _____ Email: _____

Charitable Registration # (if applicable): _____

Organization/Program Category:

- Youth/Senior
- Heritage/Civic
- Arts/Culture
- Leisure/Tourism
- Other

Briefly describe the project for which this grant/donation is requested:

Date/duration of the project: _____

Name any other organizations or agencies working with your organization on this project:

Briefly describe how this project will benefit the residents of Bradford West Gwillimbury:

Number of volunteers involved: _____

Total volunteer hours: _____

