



**KANANASKIS
IMPROVEMENT
DISTRICT**

Kananaskis Improvement District Donation Request Application

Legal Name of Organization _____

Common Name of Organization _____

Registration Number _____ Registration Date _____

Are you a CRA Registered Charity? CRA Registration Number _____

Address of Applicant Organization _____

City _____ Province _____

Postal Code _____

Project/Application Contact (this is the person we will call for project information)

Name _____ Title _____

Day Time phone _____

Email

Organization Overview

What is the purpose of your Organization?

What services do you provide to the community?

Project Description

Explain what you want to do with the funds, this includes a description of the issues and benefits to KID

How many people do you estimate will benefit from this grant?

If your application is successful, how long will it take to complete your project once funding is approved?

Please feel free to attach and other support letters or documentation that may assist in your application