



Mountain View
C O U N T Y

Health Grant – Funding Application 2022

1408 Twp. Rd. 320 / Postal Bag 100, Didsbury, AB Canada T0M 0W0
T 403.335.3311 F 403.335.9207 Toll Free 1.877.264.9754
www.mountainviewcounty.com

Name of Health Care Organization:	
Mailing Address:	
Contact Person:	
Telephone/Cell Number:	
Fax Number:	
E-mail Address:	
Registered Charity/Society Number:	

Project/Program Name: (include a projected budget with all requests)	
Description of Project/Program: (please prioritize if more than one project and identify costs for each separate project)	

Nature of Health Care Financial Assistance Requested:

☐ On Going Project ☐ One Time Project

Expenditures: (Itemize & List)	Estimated Revenue & Contributions:
_____ \$ _____	Funding from own Organization: \$ _____
_____ \$ _____	Fundraising: \$ _____
_____ \$ _____	Grants: _____ \$ _____
_____ \$ _____	_____ \$ _____
_____ \$ _____	Donations: \$ _____
_____ \$ _____	AHS Funding: _____ \$ _____
_____ \$ _____	Other: _____ \$ _____
_____ \$ _____	_____ \$ _____
Total Expenditures: (A) \$ _____	Total Estimated Revenue: (B) \$ _____

Funding Request: (A minus B)	\$ _____
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In-Kind Contributions: (e.g. equipment, labour, materials, etc.)		
Materials:		\$
Equipment:		\$
Volunteer Hours:		\$
Total In-Kind Contributions		\$

Estimated Commencement Date:	
Estimated Completion Date:	

Is the Project/Program beneficial to an Urban Municipality?	Yes	No
Has the Urban Municipality Committed/Approved Funding?	Yes	No
If so, Amount Committed/Approved:	\$ 	

The following information must accompany the grant application:

- 2021 Financial Statement including reserves
- Registered Societies Return for 2020

Signature:	Date:
Signature:	Date:

Please forward completed applications to:

Mountain View County
Bag 100
Didsbury AB T0M 0W0
Attention: Josie Abraham

Email: grants@mvcountry.com
Fax: (403) 335-9207

APPLICATION DEADLINE: July 25, 2022

For eligibility criteria, please refer to Mountain View County Policy No. 5001; Procedure No. 5001-01

ALL GRANTS ARE SUBJECT TO FINAL BUDGET APPROVAL BY COUNCIL