

Youth Event Sponsorship Grant Accountability Form POLICY #15-10

APPLICANT INFORMATION	
	Date:
Applicant Name:	
Mailing Address:	
City:	Province: Alberta Postal Code:
Telephone:	Email:
	EVENT REPORTING
survey results, or reviews from a	out the event to show how it was successful. (this could include attendees)
How many attendees?	
How many volunteers/organizer	rs?
	APPLICANT AGREEMENT
and endorsed by the ab	ned in this application and supporting documents is true and accurate ove organization. ctures provided may be used in Kneehill County's communications.
Signature:	Date: