



Community Support Program Request for Support Application

Peninsula Co-op contributes positively to the communities in which we do business through our Community Support Program. Thank you for your interest in obtaining our support which can be in the form of cash donations or sponsorship, goods or gifts in kind. While we may be unable to support every application, we do thoroughly consider each submission based on the quality of the information provided.

We appreciate the effort it takes to complete this application in a manner that will assist us when reviewing your request. The committee considers the image and community profile of your organization or event when approving funding applications.

Requests less than \$1,000 – please submit at least 2 weeks in advance of your event. Submissions are reviewed bi-weekly.

Requests in excess of \$1,000 – please submit a minimum of 6 weeks in advance. Submissions are considered by the Member & Community Relations Committee. **Please note:** the Committee meets in the following months: January, March, May, July, September and November.

***Please review the Peninsula Co-op Funding Criteria online before completing your application.**

www.peninsulaco-op.com/community/request-for-community-support-form

Requests for support must be submitted using this form.

If you are providing additional information, please limit to 3 pages in total.

Today's Date: _____ Charitable Organization #: _____
(If applicable)

Name of your organization or registered non-profit: _____

Address: _____

City: _____ Postal Code: _____

Contact Name: _____ Co-op Member #: _____
(If applicable)

Phone Number(s): _____ E-mail Address: _____

Please give details about your organization: What you do, your goals, principals, how it benefits our local communities and whether or not you receive funding from any other local or national groups, charities or organizations.

Event/project for which support is requested:

Date of Event: _____ Time: _____

Place & Location of event:

Number of people expected to attend:

Is this a first time or ongoing event/project?

Support requested from Peninsula Co-op: (Please be specific when listing item(s) and/or funding amount)

How and when will Peninsula Co-op be recognized for their support?

Is there an opportunity for any permanent recognition? (Sign or plaque) Yes _____ No _____

Has your organization applied to Peninsula Co-op in prior years? Yes _____ No _____

If yes, please list the support and the project attached to it:

Peninsula Co-op is owned and democratically controlled by local citizens. Does your organization support the Co-op through regular purchases of gas or food? Yes _____ No _____

Please note that you may be requested to provide a project budget or organizational financial statement.

Thank you for your diligence in completing this application form. Please submit your request to:

Peninsula Co-op
Marketing & Community Relations Manager
1 – 2132 Keating X Road, Saanichton, BC V8M 2A6
Fax: 250-652-5298 or email marketing@peninsulaco-op.com
www.peninsulaco-op.com