

**Schedule G**  
**YOUTH TRAVEL**

The Municipality of the District of Lunenburg offers a Youth Travel Grant to assist individuals, teams or groups of youth travel to National Competitions in sport or cultural events.

**Eligibility**

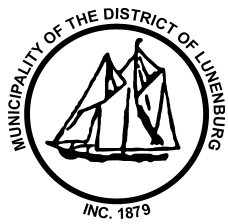
- For youth only. Youth will be defined as an individual who is attending an elementary, secondary or post-secondary educational institution
- Only residents of the Municipality will be considered for individual funding
- For any team or group to be eligible for funding, 50% of the participants must be residents of the Municipality of Lunenburg
- Grant recipients must be representing Nova Scotia at a National Competition or event

**Procedures**

- A letter of application addressed to the Recreation Director must be received 1 to 2 months prior to the travel dates for processing
  - A total budget must accompany the letter showing both revenues and expenditures (Teams or groups only)
  - Confirmation of representation must be submitted from the provincial sport body
  - Upon approval from the Recreation Director, notification will be forwarded to Municipal Councillors for information
- [amended April 13, 2010] [amended Nov. 10/09]

**Funding**

- The maximum grant available will be the lesser of \$200 per team or \$50 per Municipal Resident, but in no case will any grant exceed 50% of the total cost of the trip
- The maximum grant for an individual team player is \$50, but in no case will any grant exceed 50% of the total cost of the trip



## YOUTH TRAVEL GRANT

### APPLICATION FORM

Please complete and return to Lunenburg Municipal Recreation Department 1 to 2 months prior to anticipated start date.

Name of team or individual applying

Contact Person

Position

Mailing Address

Business telephone

Home telephone

Email

National Competition or Event and anticipated travel dates

Destination

Provincial Sport Governing Body (attach confirmation of event and team participation)

Attach List of Teams members and phone numbers who reside in the District

Attach proposed budget including total revenues from all sources.

Municipal funding requested

**I certify that, to the best of my knowledge, the information provided in this grant application is accurate and complete and that the project is endorsed by the organization which I represent.**

Name (Print)

Signed

Position

(Chair, Vice Chair, Secretary or Treasurer)

Date

Mailing Address

Telephone

E-mail Address (if applicable)

**\*\* Attach any additional supportive information\*\***

Return to: Lunenburg Municipal Recreation Dept.  
10 Allée Champlain Drive  
Cookville, NS B4V 9E4

Fax: (902) 543-7123

For information: (902) 541-1343 email [recreation@modl.ca](mailto:recreation@modl.ca)