



August 15th , 2024

Attn: Town of Claresholm Mayor & Councillors

It's getting to that time of year again, Sooo freaking excited! We have started planning the layout, crafting and getting new props for the 5th annual Claresholm Haunted House.

Because it is such a big undertaking to set up a large haunting, and the fact that all our people are working volunteers we need the equivalent of a full day to get it up and running. That being said we sent in the request for the Lodge room for October 25th to 27th.

Friday October 25th would be from 5pm to ? then we would finish in the morning of 27th with opening the haunting at 5pm. Sunday would start earlier to open we are thinking at 1pm.

Our goal is to fundraise for a chosen local community to be determined shortly as this was very successful last year, the community is always very gracious in raising money for the chosen group for the year.

Our request to the Town of Claresholm would be to ask for funds to pay or at least help pay for the use of the Lodge Room at the community center. As we are a non profit volunteer group any help would be appreciated.

Sincerely,

Tracy Elke & all the volunteer crafters, setter uppers and scarers!

Town of Claresholm Application for Donation
(Policy 5.1.01 – Schedule "A")

Date of Application: Sept 21, 2024

Date of Event: Oct 25-27



Claresholm

1. Applicant Information

Name of Applicant: Tracy Elko - Claresholm Haunt House

Address: _____

Contact Person: Tracy Elko

Phone, Fax, Email: yourdollarstorewithmore@outlook.com

2. Type of Organization: (circle) ARTS/CULTURE RECREATION/SPORTS EVENT OTHER(specify)

3. Is the Organization registered with Revenue Canada as a Charity? (circle) YES NO

If yes provide registration date & # _____

4. Is the Organization incorporated as a non-profit organization? (circle) YES NO

If yes provide registration date & # _____

5. Type of Donation: (check and explain)

- | | |
|--|---|
| <input checked="" type="checkbox"/> COMMUNITY EVENT | <input type="checkbox"/> SPECIAL EVENT |
| <input type="checkbox"/> COMMUNITY PROJECT FUNDING | <input type="checkbox"/> DONATION - Financial Assistance |
| <input type="checkbox"/> IN-KIND CONTRIBUTION - Fee Waiver | <input type="checkbox"/> IN-KIND CONTRIBUTION - Service, Equipment or Materials |
| <input type="checkbox"/> Other (explain): | |

Explanation:

Use of the small hall for our community haunted house. It is a free family event.

Amount (value) Requested: \$860.00

6. Details of how the funds will be expended:

2 days rental on hall

9. Is a copy of the organization's operational or project budget attached?

YES

NO

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(Policy 5.1.01 – Schedule "A")



Date of Application: Sept 21, 2024

Date of Event: Oct 25-29

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Address: _____

Contact Person: Tracy Elko

Phone, Fax, Email: yardollarstorewithmore@outlook.com

2. Type of Organization: (circle) ARTS/CULTURE RECREATION/SPORTS EVENT OTHER(specify)

3. Is the Organization registered with Revenue Canada as a Charity? (circle) YES NO

If yes provide registration date & # _____

4. Is the Organization incorporated as a non-profit organization? (circle) YES NO

If yes provide registration date & # _____

5. Type of Donation: (check and explain)

COMMUNITY EVENT

SPECIAL EVENT

COMMUNITY PROJECT FUNDING

DONATION - Financial Assistance

IN-KIND CONTRIBUTION - Fee Waiver

IN-KIND CONTRIBUTION - Service, Equipment or Materials

Other (explain):

Explanation:

Use of the small hall for our community haunted house. It is a free family event.

Amount (value) Requested: \$ 860.00

6. Details of how the funds will be expended:

2 days rental on hall

9. Is a copy of the organization's operational or project budget attached?

YES

NO

7. Previous Donations

Has your organization received donation from the Town of Claresholm in the past? If so, please explain the amount and use of these donations.

Date	Amount	Use of Funds
Oct 2025	440.00	hall rental
Oct 2023	660.00	" "

8. Organizational Information

What services or activities does your organization provide to the Town of Claresholm residents? (Please attach a list of membership/executive)

We put on a free haunted house for the community.

Describe in broad terms the principal objective of your organization or initiative:

To give the residents of Claresholm and surrounding communities a chance to come out as a family and enjoy a haunted house

How will your organization acknowledge the Town's donation?

The town will be recognized in all of the advertising and on posters.

10. Please provide a detailed list of all sources of funding for the organization.

Funding Source	Amount	Recommended Use of Funds
All strictly donations from the community.		