

MAIN PROJECT LEAD INFORMATION

Full Name (First, Last):			
Preferred Name (if different from given name):			
none: Fax:			
Email:			
Position/Title/Role(s):			
AFFILIATED ORGANIZATION/COMMUNITY INFORMATION	N		
Organization/Community Name:			
Leadership Contact Full Name (i.e Executive Director, Director of Recreation, or Council Member):			
Phone: Fax:			
Email:			
Registered Charity / Incorporation number:			
Website:			
Have you or the organization previously receive funding or was awarded a grant from ISWO? If yes, please list which grant, and the amount of funding awarded:			





Power 2 Play 2024: Financial support of up to \$5,000 to procure equipment to support community-based programming. Applicants can choose to use 20% of the funds to support the certification and/or training of sport leaders to help support sport programs in the community.

Please indicate the amount you are requesting (maximum of \$5000):

Please state here if you intend to use up to 20% of the funds for certification/training for a qualified facilitator/coach, and specify the certification or training program the funds will be supporting:

rescribe the need for the equipment/programming (what gaps/needs are you trying to address)?	
Vhat programs (either new or existing) will the sport equipment support?	
Vill the sport equipment be distributed to youth in the community? If so, how will youth be selected as reciquipment?	ipients for the
the sport equipment is not being distributed, who will manage the equipment and where will it be stored	?





What sport program is available in your community and who manages them?			

STREAM 1: BAUER HOCKEY EQUIPMENT

Please note that all of the Hockey equipment is new and has been donated by Bauer Hockey. ISWO will strive to match your sizing requests to the inventory Bauer has provided, but we cannot guarantee that you will receive exactly what you have requested. If your request is very specific, you may consider applying for STREAM 2 funding, and purchase your own equipment.

Equipment Item (Skates, Gloves, Helmets, Sticks)	Quantity	Sizing
Ex. Skates	5	6
Ex. Skates	10	1





STREAM 2: EQUIPMENT COSTS

Equipment List (Provide details of the equipment and certification/training to be purchased)	Quantity	Name of Potential Supplier (Please include link to website if possible)	Quote
Ex. Basketballs	20	Canadian Tire https://www.canadiantire.ca/en/pdp/spalding- nba-replica-game-rubber-outdoor-basketball- size-7-0845827p.html#srp	\$24.99/ball = \$499.80





Estimated Total			
Amount Requested (Maximum of \$5000.00)			

CONNECTING ON SOCIAL MEDIA *Optional

ISWO would like to connect with you on social media. Please add any applicable social media handles:





	i e e e e e e e e e e e e e e e e e e e
TWITTER	
FACEBOOK	
INSTAGRAM	
LINKEDIN	
OTHER	
REQUIRED ATTA	CHMENTS:
Letter of su	upport from the leadership of the Indigenous community/organization benefiting from the project.
Equipment	quote for Stream 2 (Invoice, email, screenshot of inquiry, screenshot of website amount, etc.).
ACKNOWLEDGEN	MENTS
By checking	g this box, you agree that the above information is accurate and true.
-	g this box, you acknowledge that you have read the Power 2 Play for 2024 and agree to the terms an of the funding.
-	g this box, you acknowledge that you have signing authority for the organization/community the application.
SIGNATURE	
Signature:	
Full Name (first,	last)





Date:		

SUBMISSION INFORMATION

Email Submissions

We encourage you to submit your application package electronically to the following email address: info@iswo.ca

The email must be received no later than 11:59 pm EST on February 16th, 2024 for your application to be considered.

Mail or Fax Submissions

You can mail your complete application package to:

Attn: Daniel Smith Indigenous Sport & Wellness Ontario 1090 Aerowood Drive, Unit 1A Mississauga, ON L4W 1Y5

Your application must be postmarked no later than the published deadline in order to be considered.

You can fax your complete application package to: 905-412-0325





If you require reasonable accommodation in completing the application, please direct your inquiries to your Regional Coordinator. To check which region you are in, please <u>click here</u>.

- o Carmen Jones, Southwest Regional Coordinator <u>Carmen.Jones@iswo.ca</u>
- o Josh Carpenter, Central & Northeast Regional Coordinator Josh.Carpenter@iswo.ca
- o Parker Pero, Northcentral Regional Coordinator Parker.Pero@iswo.ca
- o Cami Carpenter, Northwest Regional Coordinator Cami.Carpenter@iswo.ca
- Hannah Lazare Southeast Regional Coordinator Hannah.Lazare@iswo.ca

