



## **MUNICIPAL GRANT FUNDING PROGRAM**

# **Arts Grant Application:** Individual Artists & Collectives

**Application Deadline: 11:59 p.m., October 1, 2025**

Submit via email to [grants@beaumont.ab.ca](mailto:grants@beaumont.ab.ca)

## PART A: APPLICANT INFORMATION

Applicant Full Name

Mailing Address

Email

Phone Number

Are you 16 years of age or older? YES NO

Are you legally entitled to be or remain in Canada? YES NO

Is your primary residence in Beaumont, Alberta? YES NO

Do you ordinarily live in Beaumont, AB for at least 6 months of each year, except for attending a formal program of study? YES NO

**An Artist Biography (max 1 page) must be included in your grant funding application.  
This may be sent as a separate attachment.**

## PART B: PROJECT DETAILS

Project Name (max. 10 words)

Artist Collective Name:

Funding Amount Requested  
(\$10,000 maximum request for individuals | \$20,000 maximum request for collectives)

If your project is unable to be fully funded would you accept a smaller funding amount? Yes No

Project Budget template has been completed and is attached to this application: Yes No

**\*Applications must be accompanied by a budget in the required template\***

Project Start Date: (mm/dd/yyyy)

Project End Date: (mm/dd/yyyy)

Where will the project be located?

Is this project open to the public? Yes No

Applicants may appear before the Beaumont Arts Advisory Committee for an optional 10-minute question and answer opportunity. Would you like to appear before the Committee? Yes No

## PROJECT DESCRIPTION

Please provide an overview of the project/initiative including:

- Description of the project?
- Who are the participants?
- Who will benefit?
- How will the grant funds be used?
- Why is the grant funding needed?
- Are there any community partners or volunteers involved?

## PROJECT OUTCOMES:

What are the intended outcomes of this project/initiative? What are you hoping to achieve, and how will you measure success?

## COMMUNITY IMPACT

Describe how your project/initiative benefits the community of Beaumont and its residents. Please include how many Beaumont residents will be directly impacted or will benefit from the project/initiative.

## SUSTAINABILITY

If your goal is to have this project/initiative continue beyond the grant term, how do you intend to make it sustainable?  
(Please write N/A if not applicable)

## ACKNOWLEDGEMENT

How will you acknowledge the City of Beaumont's financial contribution?  
(Examples may be requested during grant reporting)

Social Media

E-Newsletter

Advertisements

News releases

Website

On-site signage

## PART C: DECLARATION

I DECLARE THAT:

I AM THE APPLICANT; or  
I AM A DULY AUTHORIZED REPRESENTATIVE HAVING LEGAL AND/OR FINANCIAL SIGNING  
AUTHORITY FOR THE ABOVE-MENTIONED ORGANIZATION

The information contained in this application and supporting documents are true and accurate and endorsed by the above-mentioned organization.

If successful, the funds will be awarded in accordance with the City of Beaumont's policy and current funding agreement.

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Signature

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Name

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Position/Title

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Email Address

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Phone Number

The personal information collected is authorized under Section 4(c) of the Protection of Privacy Act and is managed in accordance with the Act. It will be used to administer and evaluate applications to the City's Municipal Grant Funding Program, and may also be used to verify eligibility, determine funding levels and for ongoing program administration. If you have questions about the collection or use of your personal information, please contact the Privacy Officer at 780-929-8782