

Policy No. 42 "Municipal Grants and Sponsorship/Advertising Policy" SCHEDULE "A"

MUNICIPALITY OF BARRINGTON APPLICATION FORM

GRANTS TO NON-PROFIT ORGANIZATIONS, CEMETERIES, COMMUNITY HALLS, SOCIETIES AND MUSEUMS - Maximum of \$500

NAME OF APPLICANT ORGANIZATION:Shelburne Longboat Society
CONTACT PERSON:Patricia deMolitor
ADDRESS:PO Box 1834, 67 Charlotte St.,,Shelburne, NS BOT 1W0
TELEPHONE:902-875-6731 EMAIL: <u>shelburnelongboats@gmail.com</u>
NS REGISTRY OF JOINT STOCKS NUMBER: 3231048
FEDERAL CHARITABLE STATUS NUMBER: 841395098RR0001
1. Please indicate the grant amount for which you are applying: \$500.00
2. Please identify the community, area and/or group(s) your organization serves:
The Shelburne Longboat Society serves all of Shelburne County by offering "Row and Rides" during Founders' Days and taking part in other social events within the county. Our mandate is to promote our boat building heritage and to promote Shelburne County.

3. Please describe your organization's specific project/program/service:

Part of the promoting of our wooden boat heritage means continued maintenance of the two replica 18th century longboats. This year the boats will require more in-depth repairs. Also, our longboat building has sustained some loss of roof shingles which necessitates repairs to the roof. We fundraise as much as we can each year to cover our insurances for the boats and building as well as other expenses.

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4. Please provide a list of your membership including name, position, address and telephone number:

number.			
NAME	POSITION	ADDRESS	TELEPHONE
Patricia deMolitor	Chair	67 Charlotte St., Shelburne, NS	902-875-6731
Celia Melanson	Vice Chair	9 Arthur St., Shelburne, NS	902-875-7247
Susan Oswell	Treasurer	2452 Sandy Point Rd., Lwr. Sandy Point, NS	902-875-4279
Rachel Yellin	Secretary	16 John St., Shelburne, NS	902-966-4717
Mary MacIntosh	Director	48 Wharf Rock Rd., Liverpool, NS	902-354-4605
Jon Swim	Director	2250 Hwy #3, Barrington, NS	902-637-2033
John Oswell	Director	2452 Sandy Point Rd., Lwr Sandy Point, NS	902-875-4279
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5. Authorization:		•
Application prepared By: (Contact Person) Signature Pri	Ham Auton Pat de Molit	or 28/1/21
Board/Committee: (Signing Officer) Signature Prin		28 101122