

## 2020 Games Legacy Grant Application for Grant Funding

This grant program has specific eligibility requirements. The Application Form should clearly show how the Applicant or Application meets these requirements. The Application Form, including all required attachments, must be received by the closing date. **Late or incomplete applications will not be processed (Community Investment Program Policy FIN-220, Section 3.1.5).**

In order to complete this application for funding, please read the 2020 Games Legacy Grant Guidelines thoroughly.

If you have reviewed the 2020 Community Impact Grant Guidelines and have any questions regarding this application form or eligibility, please contact CIP@rmwb.ca.

Applicant Name: FMFD Firefit (Brandon Breitkreuz)

This application is being submitted for consideration for:

**Developmental Activities:** To assist with costs and encourage developmental activities in amateur sport or the arts.

Complete  
Pages 1-5 & 9

**Travel & Accommodations:** To assist with travel and/or accommodation costs for competitions where the applicant has qualified to compete.

Complete  
Pages 1-2 & 6-9

*(Applicants may apply for both streams, however the maximum per applicant remains the same:  
Individuals or Coaches will not exceed \$1,500 and Teams or Groups will not exceed \$3,000)*

**Declaration:** In making this application, I the undersigned, confirm:

- that I have read the Games Legacy Grant Guidelines;
- that I believe the applicant meets the requirements of the Games Legacy Grant;
- that the costs provided are fair and accurate;
- that I understand that this application form must be completed in full and received before 4:30 p.m. MT on Monday, September 23, 2019;
- that I understand that this application form and any attachments shall be part of the public Council agenda and accessible through all methods that the Council agenda is available;
- that I understand the term of the Games Legacy Grant is January 1, 2019 to December 31, 2020 and that all expenditures must happen during this term;
- that I agree to fulfil the total commitments and requirements attached to this grant including the submission of the receipts to the Community Investment Program within two months following the activity or grant approval; and
- that should I not complete the activities proposed in this application, I will refund promptly, and in full, the total grant awarded.

Main  
Contact  
Initials:

BA1

BA1

BA1

BA1

BA1

BA1

BA1

BA1

BA1

BA1

BA1

BA1

BA1

I do hereby certify that to the best of my knowledge, this application contains a full and correct account of all matters stated herein.

Brandon Breitkreuz  
Signature of Main Contact

2019/09/19.  
Date: (YYYY-MM-DD)

## 2020 Games Legacy Grant

Applicant Details	
<b>Applicant Name:</b> <small>(Individual, team, or group)</small>	FMFD Firefit
<b>Applicant Age Category:</b>	<input type="checkbox"/> Youth (0-17 years old) <span style="margin-left: 150px;"><input checked="" type="checkbox"/> Adult (18+ years old)</span>
<b>If Applicant wishes to declare as Indigenous, please select:</b>	<input type="checkbox"/> First Nation (status) <input type="checkbox"/> First Nation (non-status) <input type="checkbox"/> Métis <input type="checkbox"/> Inuit
<b>Number of members:</b> <small>(If applicant is team or group)</small>	5 members.
<b>Street Address:</b>	320 Rainbow Creek Drive.
<b>City/Hamlet:</b>	Fort McMurray
<b>Province:</b>	Alberta
<b>Postal Code:</b>	T9H 0E8

**Applicant:**

- has resided within the geographic boundaries of the Municipality for a minimum of one year;  
 is a team or group with all members residing within the geographic boundaries of the Municipality; or  
 is a registered non-profit organization that has operated in the Municipality for at least one year.

**Applicant is:**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Minor Individual | <input type="checkbox"/> Adult Individual            | <input type="checkbox"/> Coach/Instructor of Minor(s) |
| <input type="checkbox"/> Minor Team/Group | <input checked="" type="checkbox"/> Adult Team/Group | <input type="checkbox"/> Coach/Instructor of Adult(s) |

**If grant is approved,  
make cheque payable to:**

Brandon Breitkreuz

Main Contact for Application	
<b>Title:</b> <small>(Applicant, Parent/Guardian, Coach, Manager, etc.)</small>	Team Captain.
<b>Name:</b>	Brandon Breitkreuz
<b>Daytime Phone:</b>	17(1)
<b>Email Address:</b>	17(1)

**Completed Application Forms and Required Attachments are to be submitted to the  
Community Investment Program at the Regional Municipality of Wood Buffalo**

**By Email: CIP@rmwb.ca**

The personal information collected in this application is collected under the authority of section 33(c) of Alberta's Freedom of Information and Protection of Privacy (FOIP) Act. It will be used to process the application and contact you if needed, during the review of this application. If you have any questions about the collection and use of the personal information you may contact the Manager, Community Investment Program, at 9909 Franklin Avenue, Fort McMurray, AB T9H 2K4 or at (780) 743-7918.

**2019 Games Legacy Grant - Developmental Activity Application**

**Applicant is applying to:**

- Attend a course or clinic that is not available within the Municipality, for the purpose of acquiring or upgrading skills.
- Bring in an individual to the Municipality to train a coach or instructor ("train the trainer") of athletes, performers, artists, teams or groups to upgrade skills beyond what is available locally.
- Send a coach or instructor of minors for training/instruction, that is not available locally, with the intent to bring skills back to be taught in the community.
- Bringing in an individual to the Municipality to provide specific short-term developmental/instruction to coach/train an athlete, performer, artist, team or group to upgrade skills beyond what is available locally.
- Host a new or innovative skills development activity or program which will enhance the appreciation of sport, culture, or the arts for minors.

**Developmental Activity Information**

<b>Name of Program/Project:</b>	2020 Firefit Season.
<b>Beginning Date (YYYY-MM-DD):</b>	2020/04/01
<b>Completion Date (YYYY-MM-DD):</b>	2020/09/30
<b>Location:</b>	Firehall #5.

**Provide a description of the activity including any objectives and/or community benefit OR attach a brochure or activity outline (space continues on next page):**

Representing the FMFD/RMWB at regional and national comp across the country. Nationals are held in Kamloops BC in Sept 2020. We also compete at 2-3 regional events in Alberta and we are hosting our own regional comp in 2020 aswell. The grant assists team members with travel expenses + equipment for these mentioned fitness competitions.

(continued from previous)

**Describe how these short-term programs or activities are beyond the applicants' regular on-going training or instruction.**

The team trains together in 10 hours a week to represent the RMWB as a leader in the sport. We have won several national championships in the previous 7 seasons.

**Developmental Activity Financial Information**

Revenue	
Type of Revenue	Amount
Registration/Participation Fees	
Other Fees	
<b>Fundraising Activities (specify below):</b>	
Bingos	
Raffles	
Other (please specify):	
<b>Donations (do not include in-kind, only monetary donations)</b>	
Individual Donations:	
Group or Businesses:	
<b>Grants:</b>	
Federal Government:	
Provincial Government:	
Other Grant (please specify):	
Other Grant (please specify):	
Other Grant (please specify):	
Other:	
Other:	
Other:	
<b>Total (A)</b>	<b>\$ 0.00</b>

**Examples of Expenses:** Presenter/Instructor fees, registration fee if attending a course, facility or rental fee, travel costs, accommodation/meals, material or supplies, or other specific items.

Expenses	
Type of Expense	Amount
Travel / Hotel	800 <sup>00</sup>
equipment	800 <sup>00</sup>
<b>Total (B)</b>	<b>\$ 0.00</b>
<b>Surplus / (Shortfall) (A-B)</b>	<b>\$ 0.00</b>

**2020 Games Legacy Grant - Travel & Accommodation Application****Affiliations**

What are the applicants' non-profit governing sport, culture or art organization affiliations?

**Local:** FMFD Firefit team.

**Provincial:** Firefit Canada.

**National:** Firefit Canada.

**Accomplishments**

Please provide a brief description of:

- applicants' accomplishments leading up to the qualification event; or
- how the applicant meets qualifications to compete, if not through a qualifying event.

- 10 x National Champs in one of the 3 categories (A3, Team, Relay)  
- By competing at regionals ~~or~~ our best time qualifies you for nationals.



**Qualifying Event Information**

Complete if:

- Applicant has placed at a regional competition which qualified the individual or team/group to advance to a Provincial or Western Canada Championship;
- Applicant has placed at a provincial or Western Canadian Championship which qualified the individual or team/group to advance to a Canadian Championship; or
- Applicant has placed at a National championship which qualified the individual or team/group to advance to an International competition.

<b>Name of Qualifying Event:</b>	Spruce Meadows Firefit Regional.
<b>Beginning Date (YYYY-MM-DD):</b>	2020/06/06.
<b>Completion Date (YYYY-MM-DD):</b>	2020/06/07.
<b>Location of Event:</b>	Spruce Meadows Calgary.
<b>Name of Sanctioning Organization:</b>	Firefit Canada
<b>Placement in Qualifying event:</b>	
<b>Category (If applicable):</b>	Mens Open / X3 / Relay.
<b>Event &amp; Results Website Address:</b>	www.firefit.com

**Competition Information**

Championship Event Information (the event being travelled to):

*Applicants may apply for events that have happened or are happening between January 1, 2019 and December 31, 2020.*

<b>Name of Event:</b>	Natnals Firefit Kamloops
<b>Beginning Date (YYYY-MM-DD):</b>	<del>09</del> 2020/09/23
<b>Completion Date (YYYY-MM-DD):</b>	2020/09/27.
<b>Location:</b>	Kamloops BC
<b>Name of Hosting Organization:</b>	Kamloops Firefit Team New Gold.
<b>Division or Class:</b>	Mens Open / X3 / Relay.
<b>Organization/Event Website Address:</b>	www.firefit.com

### Reference Letter

Applicants **must** submit a reference letter from their governing sport/culture organization confirming their qualification to represent at the Provincial, National or International level. This reference letter is used to establish the applicant's eligibility for the Games Legacy Grant.

**Letters must:**

- be from the governing sport, culture or art organization;
- verify how applicant qualified/was selected to compete;
- include contact details;
- be signed (or in lieu of signature, writer may email cip@rmwb.ca directly);
- be dated within 30 days of application;
- received by the application deadline (4:30p.m. MT, Monday, September 23, 2019); and
- not come from immediate family members.

### Financial Information

**Travel Expenses to the Competition (complete the chosen means of travel)**

Means of Travel	Per Person Amount	Number of Eligible Applicants	Total Expense <small>(per person amount x number of eligible applicants)</small>
Travel by Air			
Travel by Bus			
<b>Other Travel Expenses</b>			
			<b>Total Expense</b>
Gas (Reimbursement based on receipts)			TBA.
Vehicle Rental			
Parking			
Taxi / Public Transit			
<b>Total Amount of Travel Expense:</b>			<b>\$ 0.00</b>

**Accommodation Expenses at the Event**

<b>Name of Hotel(s):</b>	TBA.		
Quoted Room Rate	Number of Rooms <small>(Only Teams/Groups can claim more than 1)</small>	Number of Eligible Applicants per Room	Total Accommodation Expense <small>(Quoted Room Rate x Number of Rooms)</small>
<b>Total Amount of Accommodation Expense:</b>			<b>\$ 0.00</b>



**Total Grant Request**

	<b>Developmental Activities</b>	<b>Travel &amp; Accommodation</b>	<b>Total Grant Request**</b>
<b>Amount Requested:</b>		1,500	\$ 0.00

\*\*Maximum request for individuals is \$1,500

\*\*Maximum request for teams/groups is \$3,000

**Additional Information**

Provide any additional information that may give a better understanding of your application during the grant review (optional).

We are a amateur Firefit team representing FMFD/RMWB at throughout the 2020 Firefit Season. We pride ourselves on being one of the top teams in Canada and win championships for our local region.

**Completed and Signed Applications are to be submitted:**

**In Person or By Mail:**  
Regional Municipality of Wood Buffalo  
Community Investment Program  
Community Services  
9909 Franklin Avenue  
Fort McMurray, AB T9H 2K4

OR

**By Email:**  
CIP@rmwb.ca

**LATE or INCOMPLETE applications will not be processed  
(Community Investment Program Policy FIN-220, Section 3.1.5)**



REGIONAL MUNICIPALITY  
OF WOOD BUFFALO

September 23, 2019

Community Investment Program  
Community Services Department  
Regional Municipality of Wood Buffalo  
9909 Franklin Avenue  
Fort McMurray, AB T9H 2K4  
CIP@rmwb.ca

Dear Sir/Madam,

Please accept this reference letter in support of Brand Breitkruez and The FMFD Men's Firefit Team's application to the Games Legacy Fund. Mr. Breitkruez and the rest of the team are taking part in the Firefit Challenge again this year. I am proud that these young men continue to take on this arduous challenge in this nationally recognized event and in doing so they represent Regional Emergency Services and the Fort McMurray Fire Department.

Full support is given to them in their personal goals and very best wishes in everything they do.

Sincerely,

Brad Grainger  
Deputy Chief of Operations  
Regional Emergency Services  
780-792-5543