



Community Centre Rental Fee Waiver Application

(Schedule A)

Name of Organization: Grand Valley Public Library _____

Contact Person: Joanne Stevenson

Mailing Address: 4 Amaranth St. E. Grand Valley, ON L9W 5L2 _____

Email Address: jstevenson@townofgrandvalley.ca Phone Number: 519 928-5622

Name of Event: _____

Date of Function: _____ Facility Requested: GV & District Community Centre

Describe the event (goals, itinerary, expected attendance, etc):

Library Programs for 2025
3 March Break Programs: attendance 60-125 each
Cooking Classes: Adult 2 (4 evening class sessions),
special single night classes
Childrens - grade 5-8 : 4 (6 after school class sessions)
Tween Dance - Grades 5-8 : 1 in April , the library partners with the
Agricultural Society and has a second dance the Friday of the Fall Fair.

Describe the Community Project for which the event is being held, or who will benefit from the activity or event and how they will benefit:

These library programs will be held at different times of the year. They aim to provide the community with family activities, educational, cultural and life long learning skills.

How often will this event be held (circle one)? **Annually** A one-time function

Other: _____



Will there be fundraising as part of your event, and for what purpose will funds be raised?

No, there will be no fundraising.

Is your organization prepared to share its current financial statement if requested?

- Yes
- No

Is the request for a partial or full waiver?

- Partial
- Full

Has the organization contacted other local community groups to form a partnership for this project? If so, please provide details:

Is there any additional information you would like for us to consider when reviewing the application? You may attach additional documents if you wish.

The library implemented some cooking classes in 2023. The program was very successful.

Signature of Representative:  Date: **March 12, 2025**

Office Use Only
Date Received: _____
Facility available for request: Yes No
Date of Council Review: _____
Or Not sent to Council - reason _____
Approved? No
Yes - Date of Approval: _____ Resolution#: _____