



Application Information

Association/Organization:

Contact Person:

Address:

Phone #:

Email Address:

Project /Event Details: Please provide a written description of the event including (information can be attached to application).

- Background on event
- Event size and scope, who's involved, event dates/ location/duration
- Project Objectives (indicate the specific project goals/objectives and describe how they will be achieved)
- Anticipated results (sport development, economic impact, volunteer capacity, visitor impact)
- Event Budget (show all revenue sources and expenses)

Please send completed forms to:
Department of Health and Wellness
C/O Margie Misener
PO Box 2000
Charlottetown, PEI
C1A 7N8

Email: mrmisener@gov.pe.ca

Applications may be returned if event information is incomplete