

Municipal Policy for the Recognition of Community-based Organizations New application for recognition

1) **Coordinates:**

Name of the	
organization:	
Address of the head	
office:	
City/ Municipality:	
Postal code:	
E	
E-mail:	
Web Site:	
Telephone:	
Contact person:	
Contact person's e-mail:	
Contact person's telephone:	



2) <u>Legal status:</u>

Date the organization was founded:	
Registration of a non-profit organization or corporation (circle):	Yes / No
Quebec business number (NEQ):	
Date of your last annual general meeting:	

3) Information on the organisation:

What is the mission of your organization, as described in your most recent legal documents (manifest, letters, general regulations, etc.)?			recent legal	

	YES	NO
Is your organization non-profit?		
Do you have an updated insurance policy?		
Do you promote your activities in French <u>and</u> English?		



4) Members of the Board of Directors :

Title	Name	Address	Telephone/ email



5) <u>Category / Nature of activities :</u>

Select	which of the categories best describes your organization's mandate:
	Sports and recreation;
	Culture;
	Social-community;
	Other (please specify):
Which choice	h type of activities does your organization relate to, with respect to the following
	Housing;
	Homecare;
	Community life;
	Healthy lifestyles and well-being;
	Food security;
	Transportation;
	Culture.
	Other (please specify):
the N	ribe the main activities and/or services that you offer within the territory of Municipality of Pontiac. Please specify in which sector the activities take
	Aunicipality of Pontiac. Please specify in which sector the activities take e (i.e. Breckenridge, Luskville, Quyon).



6) Benefits:

Describe the clientele that your organization's activities and/or aiming:	services are mainly
Participation and citizen involvement:	Number:
How many residents of the Municipality of Pontiac	raningi .
participated in your activities and/or benefited from your	
services during the last fiscal year?	
How many volunteers from the Municipality of Pontiac have	
contributed to the realization of your activities/services during	
the last fiscal year?	
How many hours of volunteer work (approx.) were invested in	
the Municipality during the last fiscal year?	
Documents to attach to the present application form:	
• A copy of your letters patent;	
A copy of your current general regulations; A copy of your last activity yearst.	
• A copy of your last activity report.	
Signature:	
Organisation:	
Date:/	
day month year	