

## Application for Community Affiliate Designation

The Municipality plays an active role in supporting community groups, events, and recreational programming in Municipal facilities. Community Affiliates are able to access facilities at reduced rates. To apply for Community Affiliate Designation, please complete the following form.

### Eligibility

To be eligible for Community Affiliate Designation, the organization must:

- Have a primary mandate to provide recreational, art, cultural, social and/or sport programs and services that meet community needs not being met or fully met by an existing community group with membership/participation open to all residents.
- Have a documented mission and/or mandate statement.
- Must hold a not-for-profit status.
- The group, at its sole cost and expense, shall insure its activities in connection with this policy and obtain, keep in force, and maintain insurance as stated in the Town's facility permit Terms & Conditions.
- Groups must adhere to the Ontario Human Rights Code.
- Groups applying for Affiliated Community Group status may not be approved if the new group is intending to offer a similar or duplicate service to an existing group or the Municipality of Callander.

### Community Organization Information

**Name of Organization** \_\_\_\_\_

**Mission statement/mandate of** \_\_\_\_\_

**the organization:** \_\_\_\_\_

**Contact Name for Public Inquiries** \_\_\_\_\_

**Contact phone number** \_\_\_\_\_

**Contact email/website** \_\_\_\_\_

## Additional Documentation

**Please Attach The Following Documents:**

- Current membership/participant list (*template attached*)
- Certificate of insurance / Meeting the Municipality's insurance (*see attached*)
- Schedule of programs/services/other events organization provides
- Letter of agreement confirming the right to operate the program from a provincial/national governing body (if applicable)
- Financial statement of the previous operating year's expenditures and revenues, and budget for next operating year
- Criminal record check/VSC from the primary organizer within 2 years

## Terms of Becoming Community Affiliate

- Upon approval, the organization is required to sign an affiliation group contract with the Municipality. This contract requires each group to adhere to the requirements and stipulations outlined in the Policy, and any changes deemed necessary.
- Approvals for affiliation status are granted for a maximum of two years from the date of approval. Affiliated groups must re-apply to renew their status – approval is not guaranteed in subsequent years.
- As a condition of approval, all outstanding debts, if any, to the Municipality must be paid in full or agreement regarding retirement of the debt must be in place.
- The Municipality reserves the right to request additional information at any time and allocate the facility to be provided.
- The Municipality is not responsible for the decisions and/or actions of any group or its members. Accordingly, the Municipality will not act as a review body for any such group, except to the extent that the actions of a group put the group in contravention of the Policy. Applications are assessed in accordance with the criteria established by this Policy. Notification of acceptance or ineligibility will be sent in writing. The Municipality will review applications and respond to the applicant group within fifteen (15) business days of receiving the complete application.

### Your Responsibilities

- Strictly adhere to the guidelines outlined in the Policy
- Ensure all members/participants adhere to the Municipality's policies and procedures outlined in the permit Terms & Conditions
- Provide immediate notice to the staff liaison of any changes in the community affiliates status
- Maintain up-to-date membership lists
- Provide the Municipality with an updated insurance certificate prior to policy expiry date, where applicable
- Respect the intent of the Municipality's Facility Rental Policy and comply with the booking and cancellation requirements of facility booking policies
- Apply to renew affiliation before the end of the 2-year term

I have read and understood the Community Affiliation Policy

I, \_\_\_\_\_ on behalf of \_\_\_\_\_ hereby  
acknowledge and agree to the terms and conditions of the Community Affiliation Policy.

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Signature

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Date

Applications shall be submitted to [info@callander.ca](mailto:info@callander.ca), or in person to the Municipal Office.

### Office Use Only

Date Application Received:

## Current Members/Participants List

Name	Address	Phone Number

*If additional space is required, please attach additional pages as needed.*

## Liability Insurance Coverage

All user groups/organization shall either obtain and maintain valid general liability insurance at its own expense, in a form satisfactory to the Municipality and in the amount of a minimum of five million dollars (\$5,000,000.00) and provide a copy of the certificate of insurance prior to use of the Municipal equipment/facilities OR purchase insurance through the Municipality.

Such an insurance shall be written by an insurer licensed to conduct business in Ontario and shall include “The Corporation of the Municipality of Callander” as additional insured with respect to the Lessee’s operation and obligation under this agreement. The Municipality reserves the right to request items such as additional types of insurance depending on the specific of the event.

### **Insurance Through the Municipality**

The Municipality of Callander retains insurance for most uses and user groups in the Community Centre. Upon review, staff will verify with the insurance company to ensure proper coverage is in place. If not, the user group/organization shall obtain and maintain valid general liability insurance at its own expense, in a form satisfactory to the Municipality and in the amount of a minimum of five million dollars (\$5,000,000.00) and provide a copy of the certificate of insurance prior to use of the Municipal equipment/facilities) upon approval of Community Affiliation status.

- \_\_\_\_\_ will be providing our own liability insurance and will attach the certificate of insurance.
- \_\_\_\_\_ will be purchasing insurance through The Corporation of the Municipality of Callander

## Schedule Of Programs, Services, Other Events Group Provides

*Please include any additional programming your group provides, including details about the purpose of the programs.*

Date and Location	Description