



**Town of Arnprior  
Regular Meeting of Council: April 28<sup>th</sup>, 2025**

**Correspondence Package Number A-25-APR-05**

**Recommendation:**

**That** the Correspondence Package Number. A-25-APR-05 be received, and that the recommendation(s) outlined be brought forward for Council's consideration.

**Action Item:**

1. **Municipal Grants Application (In-Kind Request) – Lions Club International, District A-4, and Blind Anglers International Tournament (BAIT)**

**That** Council of the Corporation of the Town of Arnprior receive the Municipal Grant request from Lions Club International, District A-4 and Blind Anglers International Tournament (BAIT); and

**Whereas** the Lions Club International, District A-4 is an eligible organization under the Municipal Grants Policy and supports residents in our community through the creation of BAIT as an opportunity for blind anglers to spend an enjoyable weekend together fishing; and

**Therefore Be It Resolved That** Council approve the request for waiving the boat launching fees at the Marina for 25 boats (value of approximately \$375) on May 31<sup>st</sup>, 2025; and

**Further That** Lions Club International, District A-4 be advised that it is mandatory to carry sufficient liability insurance and have the Town of Arnprior added as an additional insured for the event.

## Municipal Grants Application

<b>General Information</b>	<b>Submission Date:</b> <u>2015-04-09</u>		
Name of Organization:	<u>Lions Club International, District A-4</u> <u>Blind Anglers International Tournament (BAIT)</u>		
Street Address:	[REDACTED]		
City/Town:	<u>Arnprior</u>	Postal Code:	[REDACTED]
Contact Person:	<u>David HAINES</u>	Position/Title:	<u>Chairman</u>
Telephone:	[REDACTED]	Fax Number:	
E-mail:	[REDACTED]		
What is your organization's status?	Charitable <input type="checkbox"/>	Not-for-profit <input checked="" type="checkbox"/>	Other <input type="checkbox"/>
Authorization:	I declare that I am authorized to sign this grant request on behalf of <u>LCI, District A-4 - BAIT</u> <small>(insert name of organization)</small> [REDACTED]		Name (print): <u>David HAINES</u>
	<u>2015/04/09</u> <small>[date]</small>		Position/Title: <u>Chairman</u>
			Phone: [REDACTED]
Please provide project/event date(s) or any relevant timelines related to this request.			
<p><u>ON MAY 31, 2015 we will be holding our 35TH Blind Anglers International Tournament. We will be launching boats at the marina and the fishing will take place from 9:00AM until 3:00PM. This is an opportunity for blind participants to team up with a sighted fisherman for a day of enjoyment. The participants of this function come from all over the province and are here for the weekend.</u></p>			

Grant Request	Please check applicable request	Brief description of request (i.e. dollar amount and/or type of in-kind support, staffing requirements)
Support Funding (complete Parts A and B)	<input type="checkbox"/>	
In-Kind Support (Partnership) (complete Parts A and B)	<input type="checkbox"/>	
In-Kind Support (Single) (complete Part A)	<input checked="" type="checkbox"/>	<p><i>We are requesting that Arnprior waive the docking fees at the Marina for a maximum of 25 boats.</i></p> <p>After clarification with staff, the request is for the waiving of launching fees for 25 boats.</p>
Festivals and Events Support Funding (complete Parts A and B)	<input type="checkbox"/>	

NOTICE WITH RESPECT TO COLLECTION OF PERSONAL INFORMATION: Personal information collected on this application form is collected under the authority of the Municipal Act, 2001 and will be used for the purpose of processing the application and for administrative purposes. Questions about the collection and use of this information in accordance with the Municipal Freedom of Information and Protection of Privacy Act may be made to the Town Clerk, 105 Elgin Street West, Arnprior, ON K7S 0A8 or by phone: (613) 623-4231 ext. 1817.



**Part A** (to be completed for all municipal grant requests)

Organization/Grant Information	
What is the function of your organization (mandate/key objections)?	
In 1925 Helen Keller challenged the Lions to be Knights of the blind. 35 years ago District A-4 started BAIT to provide an outing for the blind of our District.	
Please provide an overview of the service, program or event being supported with this funding.	
BAIT provides an enjoyable weekend for the blind participants with food & entertainment & a day of fishing.	
Please explain how this service, program or event benefits the Town of Arnprior and its residents.	
Approximately 35 rooms are booked for two nights with meals supplied at town of Arnprior restaurants & catering companies.	
Does your organization use volunteers?	If yes, how many volunteers are involved and in what capacity? (e.g. administration, service level, etc.)
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Approximately 60 volunteers are involved at several levels of responsibility. Guides for each blind person are required for the weekend. Many assistants at the dock for loading & unloading. Coordinators for food services & transportation & administration.

<p>Please select target population that will benefit from this request.</p>	<p><b>Age Range:</b></p> <p><input type="checkbox"/> Children (Ages 0-12)</p> <p><input type="checkbox"/> Youth (Ages 13-18)</p> <p><input checked="" type="checkbox"/> Adults (Ages 19-59)</p> <p><input checked="" type="checkbox"/> Seniors (Ages 60+)</p>	<p><b>Number of participants benefitting from this request:</b></p> <p><input type="checkbox"/> 1-50</p> <p><input checked="" type="checkbox"/> 51-100</p> <p><input type="checkbox"/> 101-499</p> <p><input type="checkbox"/> 500-1000</p> <p><input type="checkbox"/> &gt;1000</p>
<p>Does this request align with the Town of Arnprior's <a href="#">Strategic Plan</a>, as determined by Council? Please explain.</p>		
<p><b><u>Key Priorities</u></b></p> <ul style="list-style-type: none"> <li>Economic Development – Attraction, retention and marketing initiatives and economic impact</li> </ul>	<p><i>This project brings many participants to enjoy the hospitality of Arnprior &amp; provides 20-30K to local businesses</i></p>	



<ul style="list-style-type: none"> <li>Community Well Being – Community support, arts and culture, recreational and leisure, health and well being support initiatives</li> </ul>	<p><i>This supports recreational and leisure health and well being support initiatives</i></p>	
<p>Has your organization received support from the Town of Arnprior in previous years?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>	<p>If yes, please provide additional details below.</p>	
	<p><b>Dollar (\$) value received:</b></p>	
	<p><b>Service/ Program/ Festival/ Event grant support was received for:</b></p>	
	<p><b>Type of grant support received:</b></p>	<p><input type="checkbox"/> Support Funding</p> <p><input type="checkbox"/> In-Kind Support</p> <p><input type="checkbox"/> In-Kind Partnership</p> <p><input type="checkbox"/> Festival and Event Support Funding</p>
	<p><b>Was Town staff support provided?</b></p> <p><b>If yes, in what capacity?</b></p>	



Town of Arnprior  
105 Elgin Street West  
Arnprior, ON.  
K7S 0A8  
613-623-4231

	<p><b>If this submission/request differs from previous year(s), please describe the difference?</b></p>
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