



# **HOPE Volleyball SummerFest 2027 FUNDING APPLICATION**

H.O.P.E (Helping Other People Everywhere) Ottawa-Carleton Inc.  
406-1390 Prince of Wales Drive, Ottawa ON, K2C 3N6  
613-237-1433  
[info@hopeottawa.com](mailto:info@hopeottawa.com)

## Message from H.O.P.E. President

The following will provide you with some important information on the H.O.P.E. (Helping Other People Everywhere) Ottawa-Carleton Inc. funding application and selection process. From here on, H.O.P.E. (Helping Other People Everywhere) Ottawa-Carleton Inc. shall be referred to as H.O.P.E.

**H.O.P.E.'s mission:** we are a volunteer, not-for-profit event management organization that raises funds for community-based charities and has fun doing so!

**H.O.P.E.'s goal:** to provide funding for local charitable organizations from the revenues generated through community events, including the HOPE Volleyball SummerFest.

HOPE Volleyball SummerFest doesn't happen without support from its volunteers. All completed funding applications are reviewed by a committee of H.O.P.E. member volunteers and presented to the general membership for consideration in November. At that time, a democratic vote will be held and charities will be selected to receive grants from the funds generated by the 2027 HOPE Volleyball SummerFest. The membership strives to strike a balanced choice of recipients who represent a broad range of services to the community. The selection decision of the membership is final. There is no appeal process.

The application form outlines the criteria for charity selection and requires specific information to be completed and submitted. Funds raised at the 2027 HOPE Volleyball Summerfest will only be made available to the selected recipient charities following the Celebration of HOPE in November 2027.

All applications for 2027 funding must be submitted, in their entirety, by e-mail only no later than **4:00 p.m. on Wednesday, September 30<sup>th</sup>, 2026** to:

**H.O.P.E. (Helping Other People Everywhere) Ottawa-Carleton Inc.**  
**406-1390 Prince of Wales Drive, Ottawa ON, K2C 3N6**  
[info@hopeottawa.com](mailto:info@hopeottawa.com) and [lisa.hollingshead@hopeottawa.com](mailto:lisa.hollingshead@hopeottawa.com)

|                                                                                                                                                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><u>Late applications will not be accepted.</u> Please note that applications are pre-screened and that incomplete submissions will not be presented to the membership for consideration.</p> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Should you have any questions, please feel free to contact the H.O.P.E. office by phone at 613-237-1433, or email at [info@hopeottawa.com](mailto:info@hopeottawa.com) and [lisa.hollingshead@hopeottawa.com](mailto:lisa.hollingshead@hopeottawa.com)

Thank you for your interest in partnering with H.O.P.E.

**Robert Finley**  
President | H.O.P.E. Board of Directors

## Eligibility & Selection Process

**To be eligible to receive funding from H.O.P.E., your organization must provide a completed application including, and with evidence in support of, the following criteria:**

- A non-profit charitable organization, located in the Province of Ontario, with a charitable registration number;
- Unregistered groups may apply **only** if they are being sponsored by an incorporated group that is prepared to administer the funds and ensure appropriate reporting from the applicant to H.O.P.E.;
- All incorporated applicants, and sponsoring agents, are required to show that they have been in existence for **at least one year**;
- The organization operates in a non-discriminatory manner as set down by the Ontario Human Rights Code (info on the Ontario Human Rights Commission website: <http://www.ohrc.on.ca/en/resources/code>). All applicants must follow and be aware of this. **Note: Evidence of any charity applicant's failure to adhere to this code will result in denial of the application, and possible loss of future funding**;
- The organization is committed to diversity, serving the broad range of people that make up our community;
- The organization will promote H.O.P.E.'s fundraising event to its audiences;
- **The organization demonstrates access to a strong volunteer base, and agrees to commit a minimum of 50 volunteer shifts in attendance at HOPE Volleyball SummerFest**;
- The organization may not be associated with (directly or indirectly), or organize, or receive funds from, any other volleyball-related fundraising event within the National Capital Region during the 2027 calendar year.
- Completed applications must be received complete in **electronic** format. The materials can be sent via email to the addresses provided above.
- Deadline to submit an application via email is **4:00 pm on Wednesday, September 30<sup>th</sup>, 2026**. No exceptions will be allowed.

### **Selection Process**

- Only complete applications will be provided to H.O.P.E. members for review and consideration.
- A vote by secret ballot is held with H.O.P.E. Members in Good Standing.
- The number of recipient charities in any given year will be determined at the discretion of the H.O.P.E. Board of Directors.
- Only Successful charities will receive confirmation from the Executive Director. The charity selection process is final. There is no appeal.

## **Ineligibility**

Applications for funding will **not** be considered from any of the following:

- Profit ventures and for-profit organizations,
- Organizations seeking deficit financing (or operating in a deficit position),
- Organizations with political affiliations,
- Organizations seeking funding solely for existing administrative and operating expenses including: rent, hydro, electricity, and salaries of both existing contracted workers and existing full-time/part-time employees, will render the eligibility of funding **null and void**,
- Organizations associated with (directly or indirectly), organizing, or receiving funds from any other volleyball-related fundraising event within the National Capital Region during the 2027 calendar year,
- Organizations that were selected as Recipient Charities for the HOPE Volleyball SummerFest event for the 2024 event or later.

## Commitment between H.O.P.E. and Recipient Charities

It is the intent of H.O.P.E. to develop a positive and enthusiastic partnership with all charities selected to receive funds from the 2027 HOPE Volleyball SummerFest. H.O.P.E. is a primarily volunteer-run organization and the commitment of **50 charity volunteer shifts** by each chosen recipient charity is an integral part of our Event Day requirement. In order to facilitate the planning and execution of our event, recipient charities are required to make these commitments and to participate as follows:

- **Volunteers** — Recipient Charities must recruit and coordinate **a minimum of 50 volunteer shifts in attendance on Event Day**. Failure to meet this commitment could result in a reduction in funding.
- In addition to the 50 volunteer shifts, it is highly recommended that a **Volunteer Coordinator** is identified, attend orientation, and be present on event day.
- **Charity Liaison Meetings** — there will be five evening meetings between January and July, approximately one or two hours in length. Recipient charities must have a primary representative who will attend each meeting.
- **Presentation to H.O.P.E. Planning Team** — Recipient charities will attend one Planning Team Meeting in its entirety, and will provide a five- to ten-minute presentation about the organization and the project for which it plans to use funding received from H.O.P.E.
- All recipient charities must acknowledge support from H.O.P.E. on applicable promotional, publication and media materials, with H.O.P.E. office approval.
- Any funds received by the Recipient Charity must be used in support of the project or program described in this application. Any desired changes to allocation of funds will require pre-approval from H.O.P.E. – if funds are not allocated according to the chosen program, H.O.P.E. reserves the right to recall the funding until a review by its Board and notification to its Membership can be completed. Additional remedies may include, but are not limited to, summary rejection of all future funding requests.
- Recipient Charities will submit an evaluation report following completion of the project for which funds were designated. Deadline for submission of the report is **June 1, 2028** as stated in the Recipient Charity Agreement. Failure to comply with reporting requirements will result in the charity being ineligible for funding from H.O.P.E. in the future.
- H.O.P.E. reserves the right to conduct follow-up reviews of programs/projects previously funded by H.O.P.E. to establish eligibility for future funding.
- Funding is subject to sufficient funds being available. In the event that H.O.P.E. experiences an unsuccessful event resulting in significant financial loss, H.O.P.E. reserves the right to re-evaluate the amount of funding which it will allocate to recipient charities.

## Section I – General Information

|                                                                                                                                                   |               |
|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| NAME OF ORGANIZATION                                                                                                                              |               |
| REGISTERED CHARITY BUSINESS NUMBER                                                                                                                |               |
| CONTACT PERSON                                                                                                                                    | JOB TITLE     |
| BUSINESS ADDRESS                                                                                                                                  |               |
| PHONE NUMBER                                                                                                                                      | EMAIL ADDRESS |
| WEBSITE                                                                                                                                           |               |
| HOW DID YOU HEAR ABOUT THE H.O.P.E. FUNDING APPLICATION?                                                                                          |               |
| HAS THE ORGANIZATION RECEIVED FUNDING FROM H.O.P.E. IN THE PAST? <input type="checkbox"/> YES <input type="checkbox"/> NO                         |               |
| IF YES, PLEASE PROVIDE YEAR(S) AND AMOUNT(S)                                                                                                      |               |
| HOW MANY PEOPLE DOES THE ORGANIZATION SERVE?                                                                                                      |               |
| DOES THE ORGANIZATION HAVE A MEMBERSHIP? <input type="checkbox"/> YES <input type="checkbox"/> NO                                                 |               |
| IF YES, HOW MANY MEMBERS?                                                                                                                         |               |
| DOES THE ORGANIZATION HAVE EMPLOYEES? <input type="checkbox"/> YES <input type="checkbox"/> NO                                                    |               |
| IF YES, HOW MANY? FULL TIME: PART TIME:                                                                                                           |               |
| DOES THE ORGANIZATION HAVE REGISTERED VOLUNTEERS? <input type="checkbox"/> YES <input type="checkbox"/> NO                                        |               |
| IF YES, HOW MANY VOLUNTEERS ARE AN ACTIVE PART OF THE ORGANIZATION ON A REGULAR OR ONGOING BASIS?                                                 |               |
| <b>ARE YOU CONFIDENT THAT YOU CAN RECRUIT MIN. 50 VOLUNTEER SHIFTS FOR THE EVENT?</b><br><input type="checkbox"/> YES <input type="checkbox"/> NO |               |
| IN WHAT YEAR DID THE ORGANIZATION RECEIVE STATUS AS A REGISTERED CHARITY?                                                                         |               |
| (IF NOT ENOUGH SPACE ABOVE, PLEASE USE THIS SECTION)                                                                                              |               |

## Section II – Information about your Organization

1. a. Describe the organization's purpose and primary activities (maximum 250 words).

- b. Organization's Mission statement:

## Section III – Financial Information

Submit a copy (**in electronic format**) of the organization's **most recent full set of audited financial statements**. If an audited opinion is not available, a full set of reviewed financial statements is acceptable. Financial statement compilations are not acceptable.

Please list the organization's current sources of funding, if applicable:

| FUNDING SOURCE                              | AMOUNT | % OF TOTAL |
|---------------------------------------------|--------|------------|
| Government (Federal, Provincial, Municipal) |        |            |
| Other not for profit organizations/events   |        |            |
| Internal fundraising events/initiatives     |        |            |
| Other sources of revenue                    |        |            |
| TOTAL                                       |        | 100%       |

## Section IV – Information about your Project

1. Describe the project or program the organization would implement or maintain with funds received from H.O.P.E. (maximum 250 words).

- a. This project/program is: **NEW** \_\_\_\_ or, **EXISTING** \_\_\_\_
- b. How many people would benefit directly from this project/program and its ongoing legacy?
- c. If you receive funding from H.O.P.E., what would be the longer-term impact of the project or program be within the first 1-3 years, or 5+ years? (*Number of people aided/trained, the extent of reach of the program in the community*)

- 1-3 years?

- 5+ years?

2. Submit a **detailed budget** (in electronic format) for the project or program that H.O.P.E.'s funding will support. Clearly indicate how H.O.P.E.'s funding will be used. Note: funding cannot be used solely for existing administrative and operating expenses, as noted in **Ineligibility** (page iv).
3. If applicable, please list any other current/potential sources of funding for the project or program you are applying for below:

| PROGRAM FUNDING SOURCE                      | AMOUNT | % OF TOTAL |
|---------------------------------------------|--------|------------|
| Government (Federal, Provincial, Municipal) |        |            |
| Other not for profit organizations/events   |        |            |
| Internal fundraising events/initiatives     |        |            |
| Other sources of revenue                    |        |            |
| TOTAL                                       |        | 100%       |

4. Based on the planned budget for the project or program described above, please indicate the amount of funding the organization is seeking (**maximum \$15,000**).

☐ \$15,000    ☐ Other \$ \_\_\_\_\_

- Any funds received from H.O.P.E. **must be allocated to projects in the 2028 calendar year**, as the funds raised at HOPE Volleyball SummerFest will be disbursed at the Celebration of HOPE held in November of 2027.

5. How will you promote H.O.P.E.'s funding of your project or program to key stakeholders (donors, members, volunteers, media, etc.)?
6. Feel free to provide any additional information that may be relevant to your request for funding (maximum 150 words).

## Checklist

In order to ensure that all applications are treated in a fair and equitable manner, only the requested information and supporting documents will be considered during the review process. Accordingly, please **do not** submit copies of annual reports, brochures or any other promotional material.

**The only acceptable supporting documents are the following:**

- **most recent audited financial statements (see Section III page iv)**
- **detailed budget for the project or program (see Section IV page viii)**

Understand and ensure the following:

- You have complied with the eligibility criteria (page ii)
- You understand the commitment between H.O.P.E. and recipient charities (page iii),
- You agree to recruit, coordinate, and have in attendance enough volunteers to cover **minimum 50 volunteer shifts** on HOPE Volleyball SummerFest Event Day.

Submit all requested documentation electronically by **Wednesday, September 30<sup>th</sup>, 2026**  
**before 4:00pm:**

- **Send electronic** copy to [info@hopeottawa.com](mailto:info@hopeottawa.com) and [lisa.hollingshead@hopeottawa.com](mailto:lisa.hollingshead@hopeottawa.com)

## **Privacy Statement**

H.O.P.E. agrees not to use any or all of the information supplied by the applicant for any means of: promotion, commerce, or to solicit funds, information or to sell to any other organizations. Unsuccessful applications are kept for 6 months before being safely destroyed.