



**NEWS RELEASE
FOR IMMEDIATE RELEASE**

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**TOWN OF PURCELLVILLE SPORTS FUNDING APPLICATION –
DEADLINE EXTENDED!**

PURCELLVILLE, VA. January 28, 2016— The Town of Purcellville has extended the deadline to apply for the Annual Sports League Funding. **The new deadline is February 1st at 5PM.** Applicant organizations must serve the Town of Purcellville area and have citizens of the Town of Purcellville as players. Priority consideration will be given to sports teams from Purcellville that have an open participation policy where all players are allowed to play regardless of skill level.

There is \$5,200 allocated in the FY 2015 – 2016 budget to disperse. An application is attached and can also be found on line at www.purcellvilleva.gov. Please follow the instructions, and send your completed application to, Town of Purcellville, Annual Sports League Funding, 221 S. Nursery Avenue, Purcellville, VA 20132 or emailed to msscoggins@purcellvilleva.us All applications are due by 5:00PM Monday February 1, 2016.

The Town of Purcellville, Virginia

Purcellville is an award-winning town of nearly 8,000 residents located in Loudoun County, approximately 30 miles west of Washington, DC. It has been honored for its green initiatives, most recently with the prestigious Siemens Sustainability Award for Small Communities. The Town has an elected Mayor and six Town Council members. Once a stop along the W&OD rail line, Purcellville has maintained its historic old-town feel through the restoration and maintenance of its many downtown structures, reflecting the Victorian architecture popular during the turn-of-the-century. Today, Purcellville is the economic hub of western Loudoun County and a popular weekend destination for antiquing, entertainment, farmer's markets and wineries. More info at www.purcellvilleva.gov.



TOWN OF PURCELLVILLE
FY 2016 SPORTS LEAGUE FUNDING APPLICATION
APPLICATIONS DUE BY: 5PM on Monday, February 1, 2016

APPLICANT DETAILS

CLUB/LEAGUE (No Acronyms): _____

OFFICIAL REPRESENTATIVE: _____

TITLE: _____

E-MAIL: _____

MAILING ADDRESS: _____

TELEPHONE: (Day) _____

(Mobile) _____

TOTAL AMOUNT REQUESTED: \$ _____

Is your organization recognized as a charitable organization under Virginia § 15.2-953? Yes No
 If yes, please provide proof with your application.

GUIDELINES:

The organization/league must serve the Town of Purcellville area and have citizens of the Town of Purcellville as players. *Priority consideration will be given to sports teams that serve Purcellville residents and in which all players are permitted to play regardless of skill level.*

**Participant demographic information may be requested prior to funding approval.*

**Applicants will have an opportunity to address the Parks and Recreation Advisory Board at a standing meeting.*

For more information, call (540) 751-2350. The form should be submitted by mail to the address below, or emailed to mascoggins@purcellvilleva.gov.

Town of Purcellville/Annual Sports League Funding/ 221 S. Nursery Avenue / Purcellville, VA 20132

PARTICIPANT DEMOGRAPHIC INFORMATION

Please provide the total number of participants in your program. _____

Please provide the number of participants that live in Purcellville Town Limits. _____

PAST AWARD USAGE

Is your organization a previous recipient of the Purcellville Sports League Funding grant? ___yes ___no

If so, what years did you receive the award? _____

If so, please state how the funding was used in the most recent year that your organization received the award.

Has your organization received funding sources from other outside organizations in the past? ___yes no

REASON FOR FUNDING:

Please describe the activity/project/use that you are planning to undertake:

USE DESCRIPTION:

How will the money requested assist in your planned activity/project use, if approved?

TIMEFRAME:

When are you proposing to use the funding?

OTHER INFORMATION:

We welcome any further information that may assist us in the processing of your application. Please attach any relevant price quotes, letters of support etc.

DECLARATION:

Organization Name (No Acronyms): _____

The information herein is the best of my knowledge, true and correct.

Name of Official Representative: _____

Signature: _____

Date: _____