

Wednesday, May 21, 2025



## Grants in Aid description and objectives

The purpose of the Grant-In-Aid program is to distribute funds to community based organizations, which benefit the people of White Rock and increase civic pride and awareness.

The deadline for applications is February 1, 2025. Applicants will be notified in April 2025.

### Required information

- A copy of your most recent financial statements and approved budget will be required to be uploaded as part of the application process. You will not be able to submit the application without this information. Informal statements will be considered if no formal statements are available.

### Eligibility Criteria

- Membership in the group, team, or society applying for the grant should be at least 25% from White Rock. Notwithstanding if, in the opinion of the Committee, the group will bring some substantial benefit to the community, then approval may be granted.
- An individual requesting a grant must be a White Rock resident or must be representing White Rock in a provincial, federal, or international event. Notwithstanding, exceptions can be made if the applicant has a current affiliation with the City or has made a significant contribution to the City in the past.
- Grants shall not be approved where the stated or likely purpose is to pay for past deficits or debts incurred by the organization.
- A sports team or club will only be considered for a grant if they are regional or provincial champions are identified with White Rock, and are participating in national, Western Canadian, or international competition.
- The grant must be used to contribute to the general interest and advantage of the City of White Rock and its residents, with new initiatives being given a higher priority.
- Organizations that receive other funding from the City, for example a permissive tax exemption, or operating funding, will be given lower priority than those organizations that do not already receive funding from the City.
- Organizations must submit their most recent financial statements and approved budgets. Where applicable, itemized budgets should also be submitted for specific events that funding is being applied for.
- **All grant recipients must submit a report to the Revenue Manager, Financial Services disclosing the use of the grant funds on or before December 31. Recipients who do not submit a report will be ineligible to apply for a grant in the subsequent year.**

### Applicant Information

**Name of Organization or Project** Canada West Wushu Association

**BC Society and or Registered Charity Number** S0073907

**Contact Person**

Mostafa Sabeti

**Title**

President

**Email**

**Phone Number**

**Address**

**Personal Information**

Please note that the information above will be used to mail and address the cheque if your application is successful. Your organization must be able to deposit a cheque addressed to the name entered above.

**Organization Information**

**Describe the purpose of your organization and provide a brief description of ongoing programs or activities and how your organization benefits the community.**

Our organization promotes health, discipline, and community through martial arts. We offer year-round programs in White Rock for all ages—from kids to seniors—focusing on fitness, confidence, and personal growth.

Through tournaments, after-school programs, and community workshops, we actively engage residents and promote an inclusive, active lifestyle. Our success stories, including world-level athletes from White Rock, have inspired local youth and brought pride to the community.

**Briefly describe how your organization works and cooperates with other organizations, and identify the groups you work with.**

Our organization actively collaborates with local schools, community centers, and provincial sport bodies to promote martial arts and healthy living. We work closely with Wushu Canada, Sport BC, ViaSport, the BC Athletic Commission, and Surrey School District 36 to deliver quality programs, ensure safety standards, and support athlete development.

These partnerships help us expand our reach, offer inclusive opportunities, and create a stronger, more connected community through sport.

**Describe how your organization raises funds, have you undertaken any new initiatives for fund raising?**

Our organization raises funds through program fees, local sponsorships, tournament registrations, and community donations. We also apply for grants to help keep our programs accessible to all.

Recently, we've introduced new fundraising initiatives, including community demonstration events, merchandise sales, and online donation campaigns to support athlete travel and equipment costs. These efforts help us continue offering high-quality programs while engaging the community in meaningful ways.

**Program / Project Information**

**Please describe how the requested funds will be used.**

The requested funds will be used to cover essential costs for hosting the Provincial Championships, including facility rental, equipment, insurance, officiating, awards, and promotional materials. These funds will help us keep the event accessible to all participants and ensure a high-quality, professionally run competition that benefits both athletes and the White Rock community.

Any surplus will be reinvested into future community programs and athlete development initiatives.

**Program / Project Description (short form)**

We are hosting the BC Provincial Wushu Championships in White Rock, a two-day martial arts competition for ages 7 to 65. The event promotes fitness, cultural diversity, and



community engagement, while showcasing local talent—including world-level athletes from White Rock. It will attract participants and spectators from across the province, supporting **both sport development** and the local economy.

**Event Date and Times (if applicable)** ~~May/31/2025 and Nov/22/23/2025~~ **8/24/2025**  
**Event Location (if applicable)** ~~White Rock Christian Academy~~ **WRCC or Centennial Park**  
**Estimated Attendance** +400

#### Employees and Volunteers Information

**Number of full time employees** 1  
**Number of permanent part time employees** 2  
**Number of volunteers (board and non-board)** 10  
**Total volunteer hours** 120

#### Financial Information

**Please provide a copy of your most recent financial statement and approved budget.**



CWWA financial statement \_ balance ... .xlsx

**Please attach a Program / Project budget. Do NOT include requested City funds in your budget.**



Event\_Equipment\_Budget\_Summary.pdf

**Grant in Aid amount requested** 1000

#### Certification

##### Electronic Certification

I certify that to the best of my knowledge the information provided in this application is accurate, complete and endorsed by the organization I represent.

**Name of person certifying the application**

Mostafa Sabeti

**Title of person certifying the application**

President

## 19th Golden Glory Championship Budget

Date: August 24, 2025 | Location: White Rock Centennial Park

Item	Cost (CAD)
Sanda Equipment (10 sets)	\$4,020
White Collared Shirts (20 sets)	\$600
Medals (100)	\$600
Judging Equipment (1 set)	\$500
Mat Rental	\$1,400
Venue Rental	\$250
Officials Payment (10 people)	\$800
Medical Staff	\$1,250
Insurance and Sanction Fees	\$1,600
Food and Beverage (15 people)	\$400
Total	\$11,420



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### Applicant Information

**Name of Organization or Project**

White Rock Tennis Club

**BC Society and or Registered Charity Number**

**Contact Person**

Jill Kenwood



**Title** membership coordinator  
**Email** wrtcmembership@gmail.com  
**Phone Number** **Personal Information**

**Address** 14580 North Bluff Road  
White Rock, BC, V4B 3C9

Please note that the information above will be used to mail and address the cheque if your application is successful. Your organization must be able to deposit a cheque addressed to the name entered above.

### **Organization Information**

**Describe the purpose of your organization and provide a brief description of ongoing programs or activities and how your organization benefits the community.**

White Rock Tennis Club ("WRTC") is a member-only club located in the ocean-side city of White Rock.

WRTC has 300 members with annual paying members, approximately 20 honorary members (age 80+ who do not pay an annual fee), plus 30 junior members. New members are invited to join in April of every year on a first come first serve basis.

We are a volunteer-run, non-profit society, promoting the fun, sportsmanship and love of community tennis.

We have clinics, social hours, fun tournaments, and mens and ladies competitive ladder and courts that can be booked by members.

In the summer we now offer junior programs to promote children learning the game of tennis; last summer we started offering adult clinics as well.

**Briefly describe how your organization works and cooperates with other organizations, and identify the groups you work with.**

We offer our courts to be used by the City of White Rock for children's tennis lessons on a weekly basis during the spring and summer months.

For the summer of 2025 we have opened our our club-based junior tennis clinics to the community as well as our junior members.

**Describe how your organization raises funds, have you undertaken any new initiatives for fund raising?**

Our tennis club charges and initiation fee, as well as annual dues, in order to raise funds. We have also had some private donations from members.

We are non-profit so generally don't do any extra fund raising.

### **Program / Project Information**

**Please describe how the requested funds will be used.**

To ensure the safety of our members, we have an AED in our clubhouse. This year it required a new battery and pads, which cost approximately \$800 to replace (and these will need to be replaced every 2-4 years).

**Program / Project Description (short form)** AED grant

<b>Event Date and Times (if applicable)</b>	n/a
<b>Event Location (if applicable)</b>	n/a
<b>Estimated Attendance</b>	350

#### Employees and Volunteers Information

<b>Number of full time employees</b>	0
<b>Number of permanent part time employees</b>	0
<b>Number of volunteers (board and non-board)</b>	9
<b>Total volunteer hours</b>	2000

#### Financial Information

**Please provide a copy of your most recent financial statement and approved budget.**



WRT Draft FS 2024.pdf

**Please attach a Program / Project budget. Do NOT include requested City funds in your budget.**



AEDshop2025.pdf

<b>Grant in Aid amount requested</b>	800
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#### Certification

##### Electronic Certification

I certify that to the best of my knowledge the information provided in this application is accurate, complete and endorsed by the organization I represent.

**Name of person certifying the application**

Jill Kenwood

**Title of person certifying the application**

Membership Coordinator



## INVOICE

Issue Date: 05/25/2025

Invoice#: 2025AS48131

### Billing Details

Illl Kenwood

### Shipping Details

Illl Kenwood

**\$775.95 CAD**

**TOTAL**

## Personal Information

Description	Qty	Unit Price	Subtotal	Tax	Total
Cardiac Science G3 Battery SKU: 9146-302	1	\$651.00	\$651.00	\$32.55	\$683.55
Cardiac Science G3 AED Defibrillation Pads SKU: 9131-001	1	\$88.00	\$88.00	\$4.40	\$92.40

Subtotal (2 items)	:	\$739.00 CAD
Tax (Products + Shipping)	:	\$36.95 CAD
<b>Total</b>	:	<b>\$775.95 CAD</b>
<b>Paid by customer</b>	:	<b>\$775.95 CAD</b>
<b>Outstanding (Customer owes)</b>	:	<b>\$0.00 CAD</b>

### Payment Details:

- **Card:** Visa **Card#:** \*\*\*\* 5871 ( 05/26/2025, \$775.95 CAD )

**Thank you for your purchase.**

### Company

AED4LIFE  
55 Head Street 103  
Dundas, Ontario L9H 3H8  
Canada  
HST#: 892473893

### Support

info@aed4life.ca  
aedshop.ca