

Technology Grant 2025



TECHNOLOGY GRANT

<u>DEADLINE:</u> DECEMBER 1, 2025

Technology Grant Program

APPLICATION DEADLINE: DECEMBER 1, 2025

Funding Assigned: \$4,400.00 per year in total.

Divided amongst those who apply.

Purpose

To provide assistance to member Associations to offset costs related to improving the technological facets of the sport.

Criteria

- 1. This grant is available to the following AFSS Provincial Associations:
 - Alberta Black Powder Association
 - Alberta Fullbore Rifle Association
 - Alberta Handgun Association
 - Alberta International Skeet Shooting Association
 - Alberta International Style Trapshooting Association
 - Alberta Metallic Silhouette Association
 - Alberta Sporting Clays Association
 - Alberta Smallbore Rifle Association
 - Alberta Skeet Shooting Association
 - International Practical Shooting Confederation Alberta
- 2. Programs/equipment must be intended for Association members to improve the respective sport technology.

The AFSS Executive will review and put forth any awards that warrant recognition.

Restrictions

- 1. Purchases will not be reimbursed to an <u>individual</u>. All cheques issued will be made directly to the vendor **or the member Association upon presentation of receipt** by the Alberta Federation of Shooting Sports.
- 2. Associations may only receive one grant per calendar year.
- 3. All shooting equipment purchased remains the property of the Alberta Federation of Shooting Sports until AFSS policy determines otherwise.

Eligibility

To be eligible for funding the association must:

- 1. Be current members in good standing with the Alberta Federation of Shooting Sports.
- 2. Provide a breakdown of membership according to age.
- 3. Explain the program/event related to this request.
- 4. Applications can be submitted for review anytime throughout the year.
- 5. No funds will be released till December of the current year.

Allowable Expenses

Please reference AGLC Casino Funding Approved Expenditures: #7

How to Apply

- 1. Fill out Technology Application
- 2. Fill out Part D
- 3. Fill out Part B with detailed explanations on how money was spent.
- 4. Submit Technology Application, Part D + Part B to AFSS office by December 1, 2025



TECHNOLOGY GRANT

\$4,400.00 Divided amongst the Associations that apply.

TECHNOLOGY APPLICATION

| | | Deadline | e: December 1, 2025 | | | |
|---|--|--------------|----------------------------|--|--|--|
| | | | | | | |
| Application Information | | | | | | |
| Association Name: | | | | | | |
| Contact Person: | | Phone #: | | | | |
| Address: | | | | | | |
| City: | | Postal Code: | | | | |
| Email Address: | | | | | | |
| Have you received funding from the Technology Grant in previous years? Yes No | | | | | | |
| Indicate the number of members this will impact: | | | | | | |
| 21 years and under | | | | | | |
| 22 to 59 years | | | | | | |
| | | | | | | |
| Are there any grants or services provided by other sources? Yes No | | | | | | |
| If yes, please describe below: | | | | | | |
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| Explain what you intend on using the fund for: | | | | | | |
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TECHNOLOGY GRANT

\$4,400.00 Divided amongst the Associations that apply.

Part B - Post Program Analysis

Deadline: December 1, 2025

| | | | | | | | Page | _ of |
|---|----------|--|--|--|-----|-------------|------|------|
| Association Name: | | | | | Dat | e of Claim: | | |
| Summary | | | | | | | | |
| Please print clearly. Be as detailed as possible. Attach extra pages as needed. | | | | | | | | |
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TECHNOLOGY GRANT

\$4,400.00 Divided amongst the Associations that apply.

Part D – Association Accounting List

All Claims must accompany explanation filled out in Part B (Post Program Analysis)

Deadline: December 1, 2025

| | | | | | | Page of | |
|-------------------------|------------------------|---|---------|--|---------------------|--------------------|--|
| Asso | ciation Name: | | | | Date of Claim: | | |
| | | | | | | | |
| Grant Program Category: | | ☐ Administration☐ Athlete Development☐ High Performance☐ Hosting | | □ Leadersh□ Range De☑ Technolo | ☐ Range Development | | |
| | Recipient Nar | ne: | Address | : | Amount of Claim | Amount Approved | |
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| | President Treasurer | Name: | | Address: | | | |
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| | Signature: | | | Date: | | | |