

Application for funding from the Bermuda Triple Challenge

March 16th – 18th 2018

The Bermuda Triple Challenge is an annual adventure racing event that attracts locals and racers from around the globe to Bermuda for a weekend of challenging and fun obstacle course racing. The purpose of the event is to encourage sports tourism (thus increasing the numbers and variety of individuals to visit our shores,) provide a challenging and fun event for the participants and to raise money for charity. Each year, we partner with six **youth and education-focused** registered charities in Bermuda; these charities are the recipients of the funds raised. All funds are divided equally between the six charities chosen. It is a great opportunity for the charities to participate in a fun and growing event, to meet locals and overseas visitors and to build relationship as their volunteers work together to marshal the event.

This year, we have instituted an online application process in order to assist us in choosing the beneficiary charities. We look forward to receiving your application and should you be selected, we look forward to working with you on this event.

Charity Role in Event:

- Charities are asked to participate on **ONE** of the three days of the event (either Friday evening, Saturday morning or Sunday morning.)
- You must provide a minimum of 30 – 35 volunteers to marshal the race, to assist with registration, setting up and removing obstacles at the end of your day’s event. **Volunteers MUST be above the age of 18 years (volunteers under the age of 18 years are only allowed to participate alongside a parent or legal guardian.) Volunteers MUST remain at their post until the race is completed and they have been advised by one of the regiment volunteers who are overseeing the course that they are dismissed.**

Please fill out the following information and return this form to Dr. Glenn Faries at sgfaries@northrock.bm

**** APPLICATIONS MUST BE RECEIVED BY DECEMBER 1st, 2017****

Name of Charity: _____

Contact person: _____

Position with Charity: _____

Email: _____

Phone number: _____

Registration number: _____

Mission Statement:

Brief History of the Organisation:

Please write a brief statement indicating what a gift of \$5,000 - \$10,000 would mean to your organization and how it would be used. Please indicate how your proposed use of the funds will benefit children/youth in Bermuda and their families. (If additional space is needed please attach a separate page. Please note; no more than two pages in total for this statement.)

(continued)

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Annual Operating Budget: _____

Please attach a copy of your most recent financial statements.

We look forward to receiving your submission. If you have any questions, please call Dr Glenn Faries at 335 2629