

TOWN OF BRISTOL

GRANT SUMMARY DOCUMENT

(To be authorized by the Selectboard prior to completion or submission of the grant application.)

Funding Agency Name: The Vermont Governor's Council on Physical Fitness & Sports

Address/Contact: 109 State Street, Pavilion

Montpelier, VT 05609

Phone: 802 828-3333

Date of Application Submission: 1 / 6 / 2025

Explanation of what grant funds will be used for: Swim Program, Cross Country skiing, Ice Fishing, Thursday Night skiing/snowboarding at Middlebury Snowbowl are among ideas

Application Amount Max \$8,000

Description of Matching or Other Funds to be Used NO Town Match Required

Name of Grant Applicant: Meridith McFarland/Town Of Bristol

SUMMARY OF GRANT AWARD

(To be completed by Treasurer's Office)

Date authorized by Selectboard: _____

Fund # (Assigned by Treasurer's Office): _____

Grant Award Date: ____ / ____ / ____

Grant Number issued by Funding Agency: _____

CFDA if applicable: _____

Grant Period: ____ / ____ / ____ to ____ / ____ / ____ Amended to ____ / ____ / ____

Grant Award Amount: \$ _____