

# Community Group Registry Program

## Statement of Interest

### For First Time Applicants

City of Mississauga  
Community Services  
201 City Centre Drive, Suite 900  
Mississauga, Ontario L5B 2T4



Personal information on this form is collected under the authority of Section 11 (279) of the *Municipal Act, 2001*, S.O.2001c.25. The information will be used for the administration of the City of Mississauga Recreation and Parks programs and will also be used for business you may conduct with the City relating to obtaining park/licenses and the rental of City facilities. Questions about this collection should be directed to: Community Group Support Program Administrator, Community Services, 201 City Centre Drive, Suite 900, Mississauga, Ontario L5B 2T4, and Telephone 905-615-3200, ext. 5329.

#### Organization/Group Information

Name of Organization/Group

Organization/Group First Founded

Mailing Address of Organization/Group

Email Address of Organization/Group

Organization's Website or Social Media Presence (ie. Facebook, Twitter, Instagram)

#### Primary Contact

Name

Position in the Organization/Group

Primary Phone No.

Email Address

Purpose/Mandate of Organization/Group (250 words maximum)

Neighbourhoods/Area of the City of Mississauga Your Organization Operates Within (Ward map [here](#))

- |                                       |                                 |                                 |                                 |                                  |                                  |
|---------------------------------------|---------------------------------|---------------------------------|---------------------------------|----------------------------------|----------------------------------|
| <input type="checkbox"/> Citywide/All | <input type="checkbox"/> Ward 1 | <input type="checkbox"/> Ward 2 | <input type="checkbox"/> Ward 3 | <input type="checkbox"/> Ward 4  | <input type="checkbox"/> Ward 5  |
| <input type="checkbox"/> Ward 6       | <input type="checkbox"/> Ward 7 | <input type="checkbox"/> Ward 8 | <input type="checkbox"/> Ward 9 | <input type="checkbox"/> Ward 10 | <input type="checkbox"/> Ward 11 |

#### Age Groups Served

- ☐ Pre-School (0-3)   ☐ Children (4-12)   ☐ Youth (13-21)   ☐ Adults (22-54)   ☐ Adults (55+)

#### For Sports Organizations Only

Number of Participants under 21 years of age

Number of Participants 22 years of age or older

**Are you a Regional Organization?** (eg. Do you have programs, activities or services in the City of Mississauga and another part of the GTA?)

☐ Yes   ☐ No

Please list below your organization's primary programs and services with the total number of participants, members or clients (if a social service organization).

Primary Program/Service Name, City, Location and Participant Totals			
Primary Program/Service Name	City	Location	# of Annual Participants
<b>Total</b>			

Total Number of Annual Participants, Members or Clients (if a social service organization)

Percentage of Mississauga Residents

**Categorize your Organization** (may choose more than one option)

- ☐ Affiliated Sport Provider
 ☐ Older Adult Provider Clubs
- ☐ Arts Culture Provider Clubs
 ☐ Ratepayer Resident Provider
- ☐ Community Service Organization
 ☐ Recreation Provider Clubs
- ☐ Community Sport Provider
 ☐ Youth Clubs
- ☐ Community Stewardship Provider/Clubs

### Governance Information

Organization is Incorporated as a Not-for-Profit Organization in Ontario

☐ Yes ☐ No

Organization has a Constitution and Operating By-Laws

☐ Yes ☐ No

\* If you answered **Yes** to the question above, please upload constitution and operating By-Laws.

**PLEASE NOTE:** Only PDF, DOC, DOCX, PNG, JPG, JPEG, GIF files are supported.

**CHOOSE FILE**

### Board of Directors/Officers Information

Number of Board Members/Officers

Number of Board Members that are Mississauga Residents

Percentage of Board Members who are Mississauga Residents

Is the President or Vice President a Mississauga Resident?

☐ Yes ☐ No

Date of Annual General Meeting

**Note:** if are you not using Internet Explorer, the form must be saved and sent as an attachment to: [community.group@mississauga.ca](mailto:community.group@mississauga.ca)