Town of / Ville de
Penetanguishene

ANNUAL WINTERAMA

2026

WINTERAMA ACTIVITY FUNDING REQUEST

Please submit your request to:

Cole Belcourt
Events Coordinator
cbelcourt@penetanguishene.ca
(705) 549-7453 ext.252
10 Robert St West
Penetanguishene ON, L9M 2G2

78th Annual Winterama Participation Funding Request

Event Date: February 14-15, 2026

Deadline to Apply:

Winterama is Ontario's longest running winter carnival, celebrating the vibrant spirit of our community with a weekend full of fun, entertainment, and winter magic. We are currently seeking expressions of interest from individuals and organizations who would like to be part of this iconic event. To facilitate an activity funding is available to those interested in hosting an event or activity.

We are welcoming expressions of interest for businesses and community organizations to host interactive activities and games.

Why participate?

- Be part of a cherished local tradition
- Connect with thousands of attendees
- Promote your business or organization
- Celebrate winter with the community

Please submit your expression of interest to cbelcourt@penetanguishene.ca and include the following in the form below:

- Your name or organization
- Contact information
- Description of activity
- Any other special requirements (e.g., space)
- **Funding Request**

Winterama Activity Funding Request

Applicant Details

Name:
Address:
Phone:
Email:

Organization Details, If different from applicant

Name:
Address:
Phone:
Email:

*I understand that this will be the primary contact for the event. The Events Coordinator will only be discussing event matters with this individual.

Is the Organization any of the following?

☐ Registered non-profit ☐ Community Organization ☐ Penetanguishene Business

Section 2

Activity Details

Activity Name: Expected Attendance:

Funding Request ($):

Additional Requests (e.g., space): *Note: Limited resources are available.
Activity Description:
Proposed Event Location:

Winterama Activity Funding Request

Target Audience

- ☐ Adults
- ☐ Seniors
- ☐ Families
- ☐ Children
- ☐ Teenagers
- ☐ Students (Elementary)
- ☐ Students (High School)
- ☐ Other _____
- ☐ All of the Above

# of Event Staff: **# of Event Volunteers:**

*Note: Town staff will not be available for events.

Event Date and Time

Start Date: End Date:

Start Time: End Time:

☐ I will provide the Town with a certificate of insurance naming **"The Corporation of the Town of Penetanguishene"** as an additional insured, a minimum of 7 days before the event.

The Town will require a minimum of $2 Million, but more coverage may be required depending on the nature of the event. Special Events with liquor licensed areas, midways, fireworks and other high-risk activities are required to have General Liability Insurance of no less than $5 million. Staff will confirm the coverage required before the application is approved. The Town reserves the right to request higher amounts and/or require additional coverage based on the activities offered.

☐ I acknowledge that by submitting this application it does not warrant automatic approval of said event. I also acknowledge that the Town also has the right to apply recommendations, restrictions and requirements that must be adhered to in order for the Funding Request to be approved. The Town reserves the right to deny any Funding Requests.

☐ I acknowledge that the municipality recommends that all contractors utilized with respect to the proposed event are covered with WSIB, are professionally designated, and are insured for the appropriate level of liability.

☐ I further attest to the truth of the information contained in this application.

_____

Applicant Name (Printed)

_____

Date

_____

Applicant Signature