

Rod Harquail Fund

Guidelines

Background

The fund is established in Rod's name based on the beliefs and values he felt were important and causes he supported. He understood and valued the health and well-being of his family and was very sympathetic towards other families who were not so fortunate. He gave what he felt his family could afford to support sick children by donating annually to the IWK and encouraged others to do the same.

Who We Are

The fund is governed by a committee of family and friends of Rod, and other interested people. The committee will have a balance of family and non-family members with the goal of maintaining an unbiased view point and being able to provide the most benefit for our cause. Overall, the committee should be made up of not less than 6 and not more than 10 people at any time.

Present committee members:

Chairperson - Evelyn Harquail

Signing Officers (2) - Jervis "Butch" Harquail, Kelly Gauthier

Committee Members – Gilles Legacy, Jean-Marc Diotte, Peter Thorne, Rod Gauthier

The committee is made up of strictly volunteers and no committee members receive any monetary compensation for any activities related to the fund.

The Rod Harquail Fund is an incorporated non-profit organization in the Province of New Brunswick.

Our Sources of Funds

Our primary source of funds is an annual donation from activities in conjunction with the Annual Rod Harquail Memorial 3 on 3 Hockey Tournament held in Dalhousie and run by the Dalhousie Rangers Youngtimers Hockey Club. More information is available on the website www.rodharquailmemorial.com

Other fundraisers may be held as opportunities arise.

What We Fund

The fund is intended for the benefit of sick or injured children in our region. This includes expenses incurred by the families of sick or injured children for medical treatment, testing, equipment, or related travel expenses so that they may receive the best treatment possible.

Who Can Apply

Families of sick or injured children. An application can and should be made by a third party if they are aware of a family in need.

We expect most applications to come from the Dalhousie and eastern Restigouche region in general. We do realize the importance of the regional economics, and that the fund is supported by people from the surrounding communities and across Canada through our fundraisers, so we will consider all applications regardless of region.

Grant applications and disbursements will be treated as private and confidential by the Fund Committee.

Size of Grants

The grants are intended to partially offset some of the expenses incurred due to having a sick or injured child. There is no specific set amount for a grant and this may vary from year to year depending on the size of the Fund.

Grants will be limited to one per calendar year per family.

Grant Decisions

Grant applications will be considered as promptly as possible after they are received by the committee. Decisions will be made on a case by case basis.

Besides having a demonstrated need, factors considered can include availability of funds, and timing of the application. In general, the application will have a better chance of being accepted if the applicant resides in the eastern Restigouche region.

The applicant will be informed of the decision within the shortest delay. In the event of a grant application being refused, no explanation will need to be given by the committee.

The committee reserves the right to revise any decisions on grants made at any time based on new information received or if the amount in the fund changes.

How to Apply

Application form is very brief and can be downloaded from the website www.rodharquailmemorial.com

Grant Application Form

Name of Child: _____

Age of Child: _____

Parent(s) or guardian(s): _____

Name of Applicant (if not parent/guardian): _____

Telephone Number of Applicant: _____

Address of child (Street name, number, City/Town, Prov.) : _____

Name or nature of illness or injury: _____

Date or time frame when the child became sick or injured: _____

In what city/town/hospital is the child being treated: _____

Approximate annual expenses related to sickness/injury: \$ _____

Brief description of related expenses: _____

Approximate date or time frame when expenses were incurred or expect to be incurred: _____

Amount of grant applied for: \$ _____

I certify that the above information to be true and accurate to the best of my knowledge. If I become aware of a change in the information provided I am obligated to inform the committee immediately.

Signature _____ **Date:** _____

Mail application to:

Rod Harquail Fund Application
241 Vautour St.
Dalhousie, NB
E8C 2R2

We will inform you when your application has been received.