## **Program Partnership Agreement**

## between The County of Bruce and The Municipality of Kincardine

Program Name: Child Activity Assistance Program (CAAP)	
Date(s): 2024	Time: N/A
Location: Kincardine residents accessing CAAP through Bruce County	<b>Primary Audience:</b> Kincardine families with dependent children living at home under the age of 18.

Partnership Description & Purpose: The Municipality of Kincardine wishes to transfer funds to the County to supplement the CAAP serving program clients within the geographical area of the Municipality of Kincardine. The Municipality of Kincardine agrees to transfer \$5000.00 of funding. Bruce County is responsible the financial delivery of the program. Bruce County will provide a report to municipal staff, in January 2025, outlining the number of Kincardine residents accessing the program and the amount of funds dispersed to those residents. As part of confirmation of eligibility, Bruce County will track addresses of participants. Unused funds will be held in reserve by Bruce County to be used in subsequent years for Kincardine families.

Annual Review Date: This agreement is valid for the calendar year issued. Annually, this agreement can be renewed with mutual written agreement by both parties. Both parties retain the right to dissolve the agreement prior to renewal with sixty days written notice to the other party.

**Program Description:** The Child Activity Assistance Program (CAAP) is a fund available for families with a gross income of less than \$49,466.00. The fund assists families with the cost of activities such as school trips, school nutrition programs, extra-curricular activities, arts and cultural programs, Guides/Scouts etc. Bruce County families can access this program for their dependent children under the age of 18, and receive up to \$500.00 per child, per year.

By signing, this agreement constitutes an acceptance between Bruce County and the Municipality of Kincardine.

For The Municipality of Kincardine- Print Name	For The County of Bruce- Print Name
Signature	Signature
Contact Email	Contact Email
Contact Phone	Contact Phone
Date	Date

