



2026 Prevention Sponsorships

Healthy Lamoille Valley is pleased to offer prevention sponsorships to the Lamoille Valley community, made available with funding from Northeast Prevention Consortium - Region 3 Vermont Prevention Lead Organization, supporting prevention across the lifespan.

Instructions:

- To apply, email this form to hlvsponsorship@lamoillefamilycenter.org
- If you need assistance or have questions, contact hlvsponsorship@lamoillefamilycenter.org
- To apply you must be your own fiscal agent or have an organization that agrees to accept and be responsible for grant funds on your behalf.

Important Dates:

- Applications are due November 13th, 2026
- Notice of approvals will be sent out late November, 2026
- Checks will be dispersed in early December, 2026
- Funds must be used by June 30th, 2027
- A short report including the number and age of youth and/or adults served, a short summary of the program/event, and optional photos (youth must have parental permission) is required within two weeks of completion of the project or event

Organization Name
(fiscal agent who the check will be made out to):

Organization Address:

Primary Contact Email Address:

Primary Contact Phone Number:

Event or Project Name:

Description of the Event or Project:

Dates of Event or Project:

Amount Requested (\$250 - \$500):

Date Funds are Needed By:

How do you plan to use these funds?

Would the project go on without this funding?

Does your project have other sponsors. If so, will you be including their logos in publications and advertising related to this project?

Will the funds create long-term benefits for the program or participants? If yes, please explain:

Have you received a Healthy Lamoille Valley Prevention Sponsorship in the past? If so, how will you use this project to build on knowledge or capacity, or reach a new audience?

Is this a fully substance-free activity? All sponsored activities must be fully substance-free. Substance-free includes no substances served or used at the event (including legal adult-use substances), no portrayal of substances, no gifts of substances, and no marketing of substances.

☐ Yes

☐ No

Anticipated number and age of youth who will be served by the project or attend the event:

Anticipated number and age of adults who will be served by the project or attend the event:

Does this project promote equity? If so, please describe how:

List of regional funding priorities. Please select all that apply:

☐ Priority 1: Reduce underage substance use (alcohol, cannabis/marijuana use) i.e. youth recovery supports, screening and early intervention, school-based prevention

Priority 2 – Not applicable to our region

☐ Priority 3: Reduce adult high risk substance use. i.e., Focus on healthy stress reduction and coping skills, influence on children, driving while impaired

☐ Priority 4: Increase support for LGBTQ youth, i.e., schools and supervisory unions to enhance or launch a Genders & Sexuality Alliance (GSA) group at a local school; determining school readiness & capacity for implementing a GSA; community, parent/caregiver, educator training; supporting LGBTQ youth focused support groups

☐ Priority 5: Create a community where youth and adults feel valued, connected, and supported, i.e., focus on decreasing stigma for getting help for mental health and/or substance use; reducing isolation, particularly for older adults; and building youth resiliency and youth connectedness as protective factors

By signing this form, I acknowledge that I must:

☐ provide a W9 or equivalent upon request

☐ provide a report immediately after the project or event concludes

☐ contact hlvsponsorship@lamoillefamilycenter.org as soon as we know to discuss changes if we are unable to complete the project or event as planned

Signature:

Date: