



Nelson and District Arts Council Member Grant Application Form

PLEASE READ ALL INSTRUCTIONS AND DIRECTIONS BEFORE COMPLETING FORM.

SECTION I — ORGANIZATION/INDIVIDUAL'S DATA – Please Print Legibly or Type

ORGANIZATION/INDIVIDUAL'S NAME _____			
Address _____	(Number)	(Street)	(City) (Postal Code)
Member of _____ COMMUNITY ARTS COUNCIL			
PERSON TO CONTACT ON FISCAL MATTERS:			
Name _____			
Address _____	(Number)	(Street)	(City) (Postal Code)
Telephone No. _____		E-mail: _____	

SECTION II — FINANCIAL INFORMATION

BUDGET SUMMARY FOR THE YOUR PROJECT: (Note: If you need additional space please attach a detailed budget.)

REVENUES

Earned Income
(Ticket/Art sales, rentals, etc) \$ _____
Tuition, Workshop Fees \$ _____
Membership Fees \$ _____
Federal/Provincial Grants (Canada
Council, BCAC, Canada Works, etc.) \$ _____
Donation (Private Corporate) \$ _____
Contributed Services
Itemize source & type \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

EXPENSES

Major Capital Expenses (specify) \$ _____
Space Rental \$ _____
Acquisitions, Equipment Purchases \$ _____
_____ \$ _____
Travel, Transportation Expenses \$ _____
Sets, Props, Costumes \$ _____
Advertising, Publicity \$ _____
Artist or Instructor Fees \$ _____
Personnel \$ _____
Office: Bank, Phone, Paper, etc. \$ _____
Other Operating Expenses (specify) \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

ARTS COUNCIL GRANT REQUESTED \$ _____

***TOTAL ESTIMATED INCOME** \$ _____

***TOTAL ESTIMATED EXPENSES** \$ _____

* TO BALANCE YOUR BUDGET TOTAL ESTIMATED INCOME MUST EQUAL TOTAL ESTIMATED EXPENSES

SECTION III — GRANT INFORMATION

We do fund: equipment under \$200, tools and materials, artist's fees, projects related to arts and culture, projects that enrich our community by becoming public, either by a public reading, an exhibition, or a performance. These events can be in any public space within our boundaries, and include open house. We do not fund: capital costs, such as ongoing space rental or renovations.

SECTION IV — GENERAL INFORMATION

Describe your affiliation with other local or provincial groups or associations, if any.

Briefly describe your plans for this year. For what purpose do you need arts council assistance?.

How many people will be assisted with this year's grant request?

Activity	Number of Participants	and/or	Number in Audience
_____	_____		_____
_____	_____		_____
_____	_____		_____

SECTION V — DECLARATION

Signed _____

Name (Print) _____

Date _____

I certify that the applicant organization is a cultural organization offering services to the Province of British Columbia and that to the best of my knowledge all information contained in this application is accurate and represents a reasonable estimate of future operations of this organization based on information available at this time.