



SOLO BURSARY FUND APPLICATION

CONFIDENTIAL

Date: _____

Note: You must have already started the registration process for your classes.

Participant Name: _____ Age: _____

If under 18, Parent or Guardian: _____

Address: _____ City: _____ Postal Code: _____

Phone: _____ Email: _____

Bursary funds are available for registration fees, music scores, and accompanist up to a maximum of \$100.00 per participant. (Available to residents of Grey, Bruce, and Simcoe Counties only.)

Please provide a brief outline of your reason(s) for applying to the Grey County Kiwanis Festival of Music Bursary Fund:

Discipline(s):

- Piano Voice Musical Theatre Drama/Speech Arts Guitar Strings Brass Woodwinds

AMOUNT REQUESTED: \$

Make cheque payable to:

Name: _____ **Signature: X** _____

Please email completed form to:
admin@kiwanismusicfestival.net

or:

Mail this form in a sealed envelope marked 'Confidential' to:

Grey County Kiwanis Festival of Music

Attention: Bursary Committee

P.O. Box 456

Owen Sound ON N4K 5P7

Office Use Only: (Solo Application)

Date Rec'd _____	Date Approved: _____	Date Mailed: _____	Cheque # _____	Approved by: _____
Notes: 				

Grey County Kiwanis Festival of Music

Box 456, Owen Sound, ON. N4K 5P7 • Registered Charity BN: 11894 8025 RR0001

Website: <https://kiwanismusicfestival.net/> • Phone: 226-379-4580 • Email: admin@kiwanismusicfestival.net

Sponsored by the Kiwanis Club of Owen Sound