



GROUP BURSARY FUND APPLICATION

CONFIDENTIAL

Date: _____

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

Group Name: _____ Number in Group: _____ ENT#: _____

Teacher or Group Leader: _____ ENT#: _____

Address: _____ City: _____ Postal Code: _____

Phone: _____ Email: _____

Bursary funds are available for registration fees, music scores, travel, and accompanist up to a maximum of \$150.00 per group. (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:

Small Ensemble (4-10) Choir Band Orchestra

AMOUNT REQUESTED: \$ _____

Make cheque payable to: _____

Teacher/Leader 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: (Group Application)

Date Rec'd (m/d/y) _____	Date Approved (m/d/y) _____	Date Mailed (m/d/y) _____	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

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