

**NELSON AND DISTRICT ARTS COUNCIL
REQUEST FOR MEMBERSHIP AWARD (Individual and Group)**

APPLICANT INFORMATION:

Name: _____

Address: _____

Postal Code: _____

Telephone: _____ Fax: _____

Email: _____

Are you a member of the Nelson and District Arts Council or one of it's member groups? Yes No

Have you received a previous award from the NDAC? Yes No If so, when? _____

PROJECT DETAILS:

Describe your project in a few sentences:

Why do you need Arts Council assistance for your project?

When will your project take place? _____

When do you need the award? _____

Budget: Please list your proposed expenses and revenue of the project. **Please ensure that the Expenses and Revenue columns balance.**

Expenses

Fees / registration _____

Phone/Fax _____

Travel _____

Project Materials _____

Other _____

TOTAL EXPENSES: _____

Revenue

Applicant contribution _____

Service Clubs, Sponsors _____

Scholarships, Bursaries _____

Other _____

Arts Council Request _____

TOTAL REVENUE: _____

SIGNATURE: _____ DATE: _____

Please mail to Nelson and District Arts Council, Box 422, Nelson, BC, V1L 5R2. You may attach other materials to your application. If you wish them back, please enclose a stamped envelope.