



**YOUTH ARTS AND CULTURAL BURSARY APPLICATION**

Date: \_\_\_\_\_  
Name of Youth Applicant: \_\_\_\_\_  
Age of Applicant: \_\_\_\_\_  
D.O.B. \_\_\_\_\_  
Parent/Guardian: \_\_\_\_\_  
Program/Activity: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_

Additional Contact and Phone: \_\_\_\_\_

Description of Program/Interest of Youth  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Amount of funds Requested: \_\_\_\_\_

(Not to exceed \$250/youth or \$500/family per calendar year)

**If possible, please attach a receipt of program/course youth has registered in or the address for the organization/facility applicant wishes to attend.**

What other programs/services/funding sources have you applied for to remedy your situation?  
\_\_\_\_\_  
\_\_\_\_\_

Application Information Received by \_\_\_\_\_