

SASKATCHEWAN SQUARE & ROUND DANCE FEDERATION INC.

Application for Grant – Individual

Submit to the Business Manager by **April 15th** for upcoming Grant Period Aug 1-July 31. Applicant must be a member of the SSRDF Inc.

Zone _____ Date _____ File _____

Name of individual applying: _____ Email: _____

Address: _____ City/Town: _____

PC: _____ Cell: _____ Landline: _____

Type of Event: _____ Date of event _____

Location of Event _____

Please describe the benefits to you and the community you participate in by attending this event.

Estimated Expenses:

Registration \$ _____

Travel \$ _____

Accommodation \$ _____

Other (specify) _____ \$ _____

_____ \$ _____

Total estimated expenses \$ _____

AMOUNT OF GRANT REQUEST \$ _____

Mail or email to:

Sheila Kerr, Business Manager
6 Bryant Street, Regina, SK S4S 4S6
Cell 306-596-2410
Email ssrdfbusmgr@gmail.com

OFFICE USE ONLY

Date Received _____

File # _____

Grant Approved _____

Approved by _____

PROUDLY SUPPORTED BY

