

**Wright Family Performing Arts and Entertainment Centre Foundation
COMMUNITY GRANT APPLICATION**

ORGANIZATION INFORMATION

(In this space, include the name of the Registered Charity under which the application is being made)

CRA Registered Charitable #: _____

CRA Registered Charitable Organization Name: _____

Address Line 1 _____

Address Line 2 _____

City _____ Province _____ Postal Code _____

Organization Phone () _____ - _____

Organization Website: _____

Year Established: _____

Annual Expense Budget: \$ _____ . _____

Please provide a brief description of your organization, including the services provided and population served:

PRIMARY CONTACT

The Primary Contact is defined as the RC Organization's highest ranking staff member (eg. CEO or Executive Director)

First Name: _____ Last Name: _____

Title: _____ Phone: _____

Email Address: _____

GRANT REQUEST INFORMATION

PROJECT CONTACT

The project contact is the main contact person for this grant application. This is the person we will contact if we have any questions about the project.

First Name: _____ Last Name: _____

Title: _____ Phone: _____

Email Address: _____

FINANCIAL CONTRIBUTION REQUESTED

(In this space, include the amount to be requested from the Wright Family Foundation)

Amount requested: \$ _____.

Date funds are required: _____

Are you receiving funding from other sources? Yes ___ No___

If you answered yes, identify the source and anticipated amount:

Source: _____

Amount: \$ _____.

PROJECT SUMMARY

Anticipated Project Start Date: _____

Anticipated Project End Date: _____

Describe the project, including its purpose and goals (use a separate page if required):

How does the project relate to the objects of the Wright Family Performing Arts and Entertainment Centre Foundation (see application guidelines)? How does it benefit the community? (use a separate page if required)

REQUIRED ATTACHMENTS (IF APPLICABLE)

- List of Board of Directors
- Project budget
- Quotes for purchases associated with the project
- Letters of support

Although not required, the review committee and Board of Directors may, at their discretion, request the following documentation in support of larger financial requests:

- Most recent audited financial statements
- Most recent annual report
- Income and expense budget for the current fiscal year

QUESTIONS

Should you require assistance in completing your application, or have questions regarding the Wright Family Community Grant program, please contact the following members of the review committee:

Diane McGuire
Strathroy District Arts Council
Phone: 519-205-5050
Email: healmusically@yahoo.ca

Ed Iutzi
Phone: 519-245-3131
Email: iutzi@rogers.com