Phone: 604.737.3084 executivedirector@squashbc.com www.squashbc.com



4867 Ontario Street, Vancouver, B.C. V5V 3H4

Fundamentals Junior Program Application Form

Name of Program/Event:		
Dates program/event will Run:	to	
Fundamentals Programs will receiv	ve, \$1000 maximum or 50% of Expenses whichever is less	s.
Estimated Income		
Program/Event fees		
Sponsorship		
Total Income		
Estimated Expense		
Total coaching cost		
Total facility/court cost		
Equipment cost		
Snacks		
Other		
Total Expense	<u></u>	
Total Grant Requested		
Total Grant Approved	Office use only	
paid upon receipt of a summar	amount will be paid. The remaining 25% will be ry report (including pictures) submitted upon ent. Receipts must be submitted with this form.	
Please provide the name of whom t	o make the cheque out to and mailing address to send to.	
Name on Cheque:		
Address:		
City/Postal Code:		
Name of Contact Person:		
E-mail of Contact Person:		
	Office use Only	
Code to: <u>24411</u> <u>2020 / Grassroots</u>	Initiative GrantsP2 General Acct.	
Date:	Authorized By:	

