The Ron MacKay 'Music For life' Award

Application Form

Name of Organization/	Applicant			
Contact Person				
Mailing Address				
Postal Code				
Phone Work		Home	Cel	I
Project Name				
Type of Activity	Clinic	Instrument Purchase	U Workshop	Other
Location of Activity				
Start Date			End Date	
Total Project Cost			Amount Requested	
Applicant's Signature			Dat	e
	to the application			ovide your responses on separate ch question you are responding.
How will this project su	pport the goals o	of the Ron MacKay 'M	usic for Life' Award?	

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How will this project assist you (individual application) or the organization (group application)?

Note: Organizations providing workshops or clinics are required to attach a resume or pertinent background information of the resource person(s).

APPLICATIONS MUST BE SUBMITTED AS FOLLOWS

- 1. By regular mail to: Ron MacKay 'Music for Life' Award c/o17 Coronet Avenue Halifax NS B3N 1L4
- 2. By e-mail to: jimforde@eastlink.ca

For further information contact Jim Forde Phone: (902) 479-0286 E-mail: jimforde@eastlink.ca

SUBMISSION DEADLINE: 31 MARCH