

Bursary Application Form



Yes! I have included my household's most recent Notice of Assessment as proof of income status.

Please note, a bursary application can be processed only if the above document has been provided.

Participant Name: _____

Address: _____

City: _____ Country: _____ Postal Code: _____

Participant Cell Phone: _____ Participant Email Address: _____

Parent/Guardian Information (for participants under age 19)

Parent/Guardian #1 Name: _____ Occupation: _____

Parent/Guardian #2 Name: _____ Occupation: _____

Parent/Guardian Email Address: _____ Parent/Guardian Cell Phone: _____

For which workshop(s) are you requesting support? Select all that apply.

Please visit bardonthebeach.org for dates, times, and full workshop details.

- | | |
|--|---|
| <input type="checkbox"/> Children's Camp \$400 | <input type="checkbox"/> Teen Workshop \$490 |
| <input type="checkbox"/> Early drop-off (8:30am) \$50 | <input type="checkbox"/> 15-18 Intensive \$490 |
| <input type="checkbox"/> Late pick-up (5:30pm) \$25 | |
| <input type="checkbox"/> 11-14 Intensive \$490 | <input type="checkbox"/> Bard for Life: Winter Will \$255 |
| <input type="checkbox"/> Early drop-off (8:30am) \$25 | |
| <input type="checkbox"/> Late pick-up (5:30pm) \$12.50 | |

Total bursary request \$ _____

Combined Annual Family/Household Income:

- Under \$25,000 \$25,000 - \$35,000 \$35,000 - \$45,000 \$45,000 - \$55,000 \$55,000 +

How many persons does your combined income support? _____

If your most recent income tax assessment does not reflect your current situation, please provide any additional information with this form.

Yes! I understand that completing this form does not complete my registration. I will phone 604.737.0625 ext. 243 after February 15 to register.