Bard Access Fund: Support Request Form

Section 1: Application Contact Info

If you are applying on behalf of a youth participant, please include your personal details here so we can follow up on the status of the request.



Application Contact's Name:			
Address: Street Address	City	Province	Postal Code
Cell Phone: ###-###	Email Address:		
Relation to Participant:			
Section 2: Participant Info			
Participant's Name:			
Participant's date of birth: MM - DD -	- YYYY		
Section 3: Your Request			
Which program are you requesting sup Please visit bardonthebeach.org for dates,		he drop-down menu.	
Please share the name(s) and date(s) For example, "Hamlet from July 29 to Aug	·	ole from January 10 to March 27"	
What would you like us to know abou	it your situation as we consider you	ır request?	
What is the total registration cost* of * Please include the total price, not including			
Are you able to make any contribution without hardship? If so, please indicate	=		
TOTAL REQUEST \$			
The state of the s	ting this form does <u>not</u> complete naim@bardonthebeach.org to c		