



BURSARY APPLICATION

PLEASE PRINT _____ (name of individual or ensemble**) NAME 1. Address Phone E-mail Web site? **If an ensemble, please list names of members: Type of activity proposed (check one): 2. Participation in extra-curricular education; i.e., early music workshop or master class (Open only to permanent residents of Vancouver Island or a Gulf Island) Presentation of extra-curricular concert or recital to be held on Vancouver Island / a Gulf Island Presentation of community education activity to be held on Vancouver Island / a Gulf Island 3. Title of activity Date(s) & time of event Venue City & Prov / State 4. (a) Attach a short, up-to-date resume of the applicant's (or ensemble's) involvement and/or qualifications in early music. {max ½ typed page; enclose CD or other supporting material if you wish}. (b) Outline the proposed activity and its benefits to the applicant or the community {max ½ typed page} Prepare and sign the budget estimate, using the worksheet provided. 5. I / we certify this application accurately represents the proposed activity: Signature Date: _____

Mail the application to:

Signature*

*For ensembles, two members must sign.

Bursary Committee, Early Music Society of the Islands, 1067 Victoria Street, Victoria BC V8S 4N9

If you have questions, please leave a message at (250) 882-5058 or send e-mail to: info@EarlyMusicSocietyoftheIslands.ca

Date: _____





BURSARY BUDGET ESTIMATE

Eligible Expenses for Activity	Income / Revenues from Activity	
Travel**	Ticket sales	
Meals**	Net sales of merchandize, food, etc	
Accommodation**	Other sales	
Registration / Tuition**	Individual cash donations	
Fees for artists / instructors	Fees earned by individual / ensemble**	
Expenses for artists / instructors	Reimbursements to indiv. / ensemble**	
Publicity	Prizes / awards for activity	
Venue Rental		
Tickets & Programmes		
Equipment rentals & transport		
Other (specify – the EMSI Bursary Committee will determine which are eligible):	List all requested [R] and confirmed [C] grants from governments, corporations and other organizations:	
	RC EMSI Bursary	
	RC	
Total	Total	
**If the applicant is a group or ensem	nble, show the total for the group	
/ we certify that this budget is an accurate sta	attement of \square projected OR \square actual income and	l expenses:
Signature	Date	

NAME _____ (Individual or ensemble)