

**Tupper Lake Arts Council/Kiwanis Club
Funding Application**

Date: _____

Applicant Name: _____

Age: _____

Address: _____

Telephone number: _____

Activity for which you are seeking financial support (music lessons, drama coaching, dance classes, instrument rental, etc.) _____

(Attach brochure or advertisement to this application, if appropriate)

Amount of financial support you are seeking: _____

Beginning Date for this activity (when do you plan to start?): _____

Name/Address/Telephone number of provider (music teacher, dance instructor, etc.):

In the space provided below, briefly describe the your interest in the particular area of the arts for which this funding is to be awarded. Continue on back if more room is needed. Parents/guardian may complete the following for young children:

Name of person completing application: _____

Relationship to applicant: _____

Address and Telephone Number (if different from applicant): _____

Signed: _____ Date: _____

Return to:

Tupper Lake Arts Council/Kiwanis Club

P.O. Box 825,

Tupper Lake, NY 12986

(TLAC to complete): Date received: _____ by: _____

All successful applicants will be called upon to contribute work-time to the TLAC organization.