



COMMUNITY GRANT APPLICATION

SECTION A: APPLICANT INFORMATION

1. ORGANIZATION NAME My Artist's Corner Society, BC		
2. ORGANIZATION STREET ADDRESS 109-7355 Canada Way, Burnaby, V3N 4Z6		
3. WEBSITE (IF APPLICABLE) myartistscorner.ca		
4. GRANT APPLICATION MAIN CONTACT PERSON		
NAME Ruth MacLennan	PHONE (778) 879-4067	EMAIL president@myartistscorner.ca
5. ALTERNATIVE CONTACT PERSON		
NAME Teresa Morton	PHONE (778) 855-1704	EMAIL society.at.mac@gmail.com
6. APPLICANT TYPE		
<input type="radio"/> LOCAL REGISTERED NON-PROFIT SOCIETY	SOCIETY NO S-0066137	DATE OF INCORPORATION 2016-10-05
<input checked="" type="radio"/> REGISTERED CHARITY	CHARITABLE NO 74817 4521 RR0001	
<input type="radio"/> NATIONAL/INTERNATIONAL NON-PROFIT OPERATING LOCALLY	SOCIETY NO	DATE OF INCORPORATION
<input type="radio"/> SPORT OR RECREATION ORGANIZATION		
<input type="radio"/> OTHER	SPECIFY	

SECTION B: GRANT INFORMATION

1. ARE YOU? <input type="radio"/> New Applicant <input checked="" type="radio"/> Returning Applicant	
2. SELECT THE KIND OF COMMUNITY GRANT YOU ARE APPLYING FOR: <input checked="" type="radio"/> General Grant (Operating) <input type="radio"/> General Grant (Programming) <input type="radio"/> Recreational Sport Grant <input type="radio"/> Fee Waiver	
3. AMOUNT YOU ARE REQUESTING: \$ 9,064.00 <input type="checkbox"/> In-Kind (check if applicable)	
4. TOTAL COST OF THE PROJECT/EVENT/PROGRAM ETC. \$ 36,257.00	
5. IF YOU ARE A RETURNING APPLICANT AND ARE REQUESTING AN INCREASE OVER YOUR LAST YEAR GRANT AMOUNT AWARDED. PLEASE PROVIDE A RATIONALE FOR THE INCREASE. We have experienced serious challenges due to COVID-19; both our major Shows were canceled in 2020. While our Shows are primarily designed to promote our participants' work in the community at large, they also play an important role in our fundraising. In addition, our participants have not been able to contribute as much in fees to the program as they had been doing.	