



Garth Homer
FOUNDATION

Grant Application

Applicant

Address

City

Province

Postal Code

Telephone

Fax

Website

E-Mail Address

Contact

Title

Registered Business #

RR

BC Society #

Reason

Requested Amount

Total Project Budget

Year

Board Chair/President

Executive Director

Signature

Printed Name

Date

This Section for Garth Homer Foundation

Date received: _____

From: _____

By: _____

Comments:

Board Approval: _____