

2009–10 Application
(JULY 1, 2009 – JUNE 30, 2010)



ORGANIZATION INFORMATION

Name of Organization (please print)

Mailing Address

City Postal Code

Phone Alt. Phone Fax

Email Address Alt. Email Address

Web Address

BC Society Act# Date Registered (dd/mm/yy)

Federal Charitable Tax# (if applicable)

When was your society's most recently completed fiscal year end? dd/mm/yy

SUBMITTING OFFICERS – **NOTE:** One of the submitting officers **MUST** be the Chair/President

Primary Officer Ms. Mr.

Name (please print)

Title Home Phone (required)

Secondary Officer Ms. Mr.

Name (please print)

Title Home Phone (required)

Declaration (Both signatures are required)

We Do Solemnly Declare:

- A: That, to the best of our knowledge, the information given in this application is complete and true in every respect.
- B: That the Society has complied with requirements of the Criminal Review Act in every respect applicable to the Society.

Signature of Submitting Officer (*representing the Board*) Date

Signature of Society Chair or Treasurer Date

COMPONENT & GRANT AMOUNT REQUESTED (Complete one only)

Community Presenter \$ (max. \$4,500)

Key Presenter \$ (max. \$7,000)

Diverse Collaborations \$ (max. \$5,000)

Both Key & Diverse Collaborations Presenter \$ (max. combined \$10,000)

If you received a CPA grant before, what year did you receive it?

ALL APPLICANTS MUST PROVIDE:

- > Independently prepared annual financial statement or audit for the most recently completed year, signed by a board member.
- > Attach a list of board of directors' names and their contact information. Key Presenters, a list of staff, job titles.
- > A *Final Report* for the most recent CPA grant (does not apply to first-time applicants).
You can find a blank *Final Report* form at www.bctouring.org/presenter-assistance

NOTE:
Professional arts organizations receiving annual operating assistance from the BC Arts Council are not eligible for CPA.



John McLachlan
Program Coordinator
T 604 254-2554
F 604 909-1936
cpa@bctouring.org

Completed applications should be sent directly to:
BC Touring Council
PO Box 547
Nelson, BC V1L 5R3



Identify Collaborators

1. List your collaborators below and attach further information (CVs resumes, background information).
2. Supply letters of support from the proposed collaborators in which they outline the benefits to their community.

PROPOSED COLLABORATOR(S) (you must be a registered B.C. Society in good standing)

Name of Organization (please print)

Contact Name

Mailing Address

Postal Code

Phone

Email Address

Web Address

Number of years in operation

PROPOSED COLLABORATOR(S) (you must be a registered B.C. Society in good standing)

Name of Organization (please print)

Contact Name

Mailing Address

Postal Code

Phone

Email Address

Web Address

Number of years in operation

PROPOSED COLLABORATOR(S) (you must be a registered B.C. Society in good standing)

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Number of years in operation

Forecast Project Budget – 2009–2010

Expenses eligible for component B funding include: 50% of professional BC and/or Canadian artists' fees; facility rental; production costs, including technical costs; marketing expenses, translation or interpretation costs; a limited amount of applicant staff costs for mentoring new community presenters.

Expenses noted in budget must all be attributable to the diverse collaboration(s)

REVENUES

EARNED REVENUES

Tickets – Single Admissions _____
 Concession / Catering Income _____
 Program Advertising _____
 Misc. Earned Income _____
Total Earned Revenue _____

PRIVATE SECTOR

Fundraising – Corporations / Sponsors _____
 Fundraising – Foundations _____
 Fundraising – Individuals _____
 Other (In kind donations, etc) _____
Total Private Sector _____

GRANTS / GOVERNMENT

BC Arts Council – Diverse Collaborations (CPA) _____
 Direct Access to Gaming _____
 Province of BC (specify) _____
 Federal Gov't (specify) _____
 Local Government (Municipal) _____
 Local - Other (specify) _____
 Other Grants (specify) _____
Total Grant Revenues _____

TOTAL ALL REVENUES

EXPENSES

PRESENTATION EXPENSES

Artists' Contract Fees _____
 Artists' Travel / Accommod. / Meals / Hospitality _____
 Perf. Salaries – Technicians, Security, Custodians _____
 Ticketing – Surcharges, Printing, Service Fees _____
 Materials – Programs _____
 Technical – Equipment Rental / Purchase _____
 Technical – Piano Maintenance / Tuning _____
 Technical – Sound / Lighting / Other _____
 Royalties – SOCAN, Other _____
 Performance Facility Rental _____
 Concession / Catering / Other Audience Services _____
 Complimentary Tickets _____
 Misc. Presentation Expenses _____
 Other (specify) _____
Total Presentation Expenses _____

ADMINISTRATION EXPENSES

Salary – Facility Collaborator _____
 Salaries – Facility Collaborator Support Staff _____
 Office Supplies, Printing, Photocopies _____
 Insurance Fees _____
 Promotion/Advertising _____
 Telecommunications (Phone, Fax, Internet) _____
 Misc. Administration _____
 Other – Translations _____
Total Administration Expenses _____

TOTAL ALL EXPENSES

TOTAL SURPLUS/DEFICIT (Revenues less Expenses) _____

Statistics – 2009–2010

Facility or Host Organization: _____

	PRESENTATION 1	PRESENTATION 2	PRESENTATION 3
Date(s) of Performance(s)	_____	_____	_____
Diversity Artist Presented	_____	_____	_____
Collaborating Community Presenter	_____	_____	_____
Venue/Facility Collaborator	_____	_____	_____
Number of Seats (capacity of venue)	_____	_____	_____
Attendance			
# of Adults	_____	_____	_____
# of Students	_____	_____	_____
# of Seniors	_____	_____	_____
# of Complimentary Tickets	_____	_____	_____
Total Ticketed Attendance	_____	_____	_____
Ticket Prices			
Single Adult Price	_____	_____	_____
Single Student Price	_____	_____	_____
Single Senior's Price	_____	_____	_____
Single Series / Member Price	_____	_____	_____

Support Materials & Checklist Required:

- > A list of Professional staff and their positions if you are a facility applicant?
- > A list of board of directors, advisory council or commission?
- > A copy of your most recent year-end financial statements, duly signed?
- > Letters of support from your collaborating partners?
- > The details of your proposed program?
- > CVs of your proposed Collaborators and Artists' Bios?
- > All pages of the application form?
- > The final report for 2008–2009 (if applicable)?

QUESTIONS? Don't hesitate to contact the program coordinator with any questions.

John McLachlan – Program Coordinator T 604 254-2554 F 604 909-1936

cpa@bctouring.org

MAIL TO:

Presenters Assistance c/o BC Touring Council
PO Box 547
Nelson, BC V1L 5R3

DEADLINE: POST YOUR APPLICATION BY JUNE 30, 2009