

APPLICATION FOR FINANCIAL ASSISTANCE AHDA NS REPESENTATIVES SDCCS 20_____

I, Applicant's Full Name	was recently selected to represent Nova Scotia at the ScotDance
Canada Championship Series in	Host Province .
I am requesting funding from the	AHDA to assist with some of the costs incurred with this event.
Phone#:	Email Address:
X	X
Applicant's signature or Parent/Guardian if under 18	Date

- All applications must be submitted by the AGM for consideration.
- Funding is approved at the AHDA AGM. Contact will be made following that date.
- Funding Amount will vary depending on # of applicants, and host province.

	PROVINC	E								
# of	NS	NB	PEI	NL	QB	ON	MB	SK	AB	ВС
dancers										
1-2	500	500	500	800	700	700	800	800	800	1000
3-4	500	500	500	600	600	600	700	700	700	800
5	400	400	400	500	500	600	700	700	700	800
6 or	400	400	400	500	500	500	500	500	500	500
more										