

## SINGLE PERFORMANCE AND/OR PROGRAM SERIES

## REQUEST FOR PROJECT FUNDING

Name of	Sponsor/Prese	enter		Contact Name				
Address			City	City		State/Province		
Telephone			Fax	Fax		Email		
relephone			l ax					
Federal Tax Identification Number: Is the Sponsor/Presenter a 501 (c) (3) Organization?								
*Enclose a completed W-9 form with this submission*								
Program Goal and Performance Description:								
Perf. No.	No. Of Musicians			Instrumentation				
1								
2								
_								
3								
Perf. No.	Date of Perf.	Starting & Ending Time	Performand And <u>Full</u>		Leader/Group Name	Min/Max Estimated		
						Attendance		
1								
2								
3								
	1				<u> </u>			
STYLE OF MUSIC:								
Performance 1 Performance 1			Performance 2		Performance 3			
VENUE TYPE:								
			Performance 2		Performance 3	Performance 3		
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