

Parent/Guardian Information

Child lives with both parents mother father guardian(s) Other: _____

Program which assistance is requested: Fair Jeanne voyage # _____ Black Jack camp # _____

Amount you feel you/ your family can contribute: \$ _____

Please describe why you are requesting financial assistance. Please attach additional pages if more space is required.

Second program choice, voyage # _____

Amount you feel you/your family can contribute to this voyage \$ _____

Documents to submit

Please send us a copy of tax forms *or* a notice of assessment *or* statements from an employer for *each* parent/guardian providing financial support for your child. You can obtain a Notice of Assessment from the Canada Revenue Agency. All information received in support of applications will be kept strictly confidential and any personal information will not be shared with persons outside of the Committee.

Primary Parent/Guardian Contact Information

Name: _____

Address: _____

City: _____ Prov. _____ Post Code: _____

Relationship: Mother/ Father Other: _____

Telephone: (Day) _____ (Night) _____ (Other) _____

Fax or email: _____

I certify that all general and financial information provided is true, accurate and complete.

Signature: _____ Date: _____

Send completed application and supporting documents to:
Bursary Committee
Bytown Brigantine Inc. 2700 Queensview Dr. Ottawa Ontario K2B 8H6
Tel. 613-596-6258 Fax. 613-596-4335
Email: registrar@tallshipsadventure.org