



**CLINTON & DISTRICT COMMUNITY FORESTS OF BC LTD**

**APPLICATION DEADLINE- APRIL 30**

**FUNDING REQUEST FORM**

Date Submitted: \_\_\_\_\_

Name of Organization:

\_\_\_\_\_

Contact Name and role within organization:

\_\_\_\_\_

Mailing Address:

\_\_\_\_\_

Contact Phone Number:

\_\_\_\_\_

Please provide a brief description of your organization:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please provide a brief description of your funding request including the intended use/purpose and if it is time-sensitive:

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Anticipated Benefits (to the organization, community, region or other):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PLEASE RETURN TO** Clinton Community Forest at:

[clintoncommunityforest@outlook.com](mailto:clintoncommunityforest@outlook.com) or PO Box 567, Clinton, BC V0K 1K0

Or in person at:

Room 203, 1423 Cariboo Highway, Clinton, BC





**CLINTON & DISTRICT COMMUNITY FORESTS OF BC LTD**

Number of People who will benefit (indicate if this is an estimate):

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How will this funding enhance the reputation or profile of the Clinton and District Community Forest or the Village of Clinton:

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Total Amount of Request: \_\_\_\_\_

In what name should a cheque be made out to in the event your application is approved?

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**\*Please note the Clinton Community Forest is unable to address funding Cheques in the name of an individual- All groups must have a valid bank account\***

**Clinton & District Community Forest Use Only:**

Authorized By: \_\_\_\_\_



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