



**STUDIO RENTAL DISCOUNTS AND SUBSIDIES AT SCOTIABANK DANCE CENTRE
APPLICATION FORM**

All information provided on this application form will be treated with the strictest confidence and used solely for the purpose of evaluating applicants' eligibility for studio rental discounts and subsidies.

ALL APPLICANTS

Name of artist/company (note: this must correspond to your Full Artist or Company membership) Contact person	
Address	
Telephone number	Fax number
Email	Website

1. Please provide a brief outline of the nature of your work:

2. Please provide an outline of your plans over the forthcoming year (all locations):

3. Please check ALL the categories you are applying for:

Dance Discount

Creation Subsidy

Support for Small Dance Companies/Independent Artists

4. What kind of activities do you plan to undertake at Scotiabank Dance Centre in the coming year? Please estimate how they will break down as a percentage of your total bookings:

Classes _____% of total booking

Workshops _____% of total booking

Creation/rehearsals/production _____% of total booking

Other (please specify) _____% of total booking

CREATION SUBSIDY APPLICANTS ONLY

5. Please provide the following:

Dates and venues for performances you have presented during the last two years

Dates and venues for the performance(s) you will be in rehearsal for at SBDC.

6. Companies only: are you a not for profit society? (Required for creation subsidy)

Yes

Please provide a copy of your certificate of incorporation.

7. Do you receive, or are you eligible to apply for, funding from public sources (eg Canada Council, BC Arts Council)?

Yes No

If yes, when was the last time you applied for or received support, and from which funding source?

SUPPORT FOR SMALL DANCE COMPANIES/INDEPENDENT ARTISTS ONLY

8. Please provide information on your annual operating budget.

Companies: please state your annual company operating budget and provide a copy of your end of year financial statement:

Artists: please provide a copy of your most recent tax assessment showing your annual income.

ALL APPLICANTS

I hereby declare that the information contained in this application form is true.

Signature _____

Date _____

FOR OFFICE USE ONLY

Membership category:
Expiry date:
Application received on (date)
By (staff name)

Approved for:
On (date):
By:

The Dance Centre values your privacy. We will not disclose information without your consent, and we do not rent, sell or trade mailing lists. If you have any concerns relating to privacy please contact our Privacy Officer at admin@thedancecentre.ca.

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