

# Request for funding

Please complete this application and submit to Manitoba Public Insurance at least 60 days before the event, program or project commences (or six months if request amount is \$5,000 or more).

Organization name:	Application date:
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Event/Program location:	
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Address:	Postal code:
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Contact:	Phone:
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E-mail address:	Fax:
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- Fundraising event date(s) or duration of program or project date:  

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- Event, program or project name:  

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- Objectives of event, program or project:  

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- Brief description of the event, program or project:  

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- What year did this event, program or project begin?  

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- Amount of money requested from Manitoba Public Insurance: \$  

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- How would our funding be applied to the event, program or project?  

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- Please submit a draft budget of revenue and expenses for this event, program or project.  

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- What is the net profit goal for this event, program or project? \$  

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- How many people are expected to attend the event, program or project: **(Check one)**  
 Up to 250     251-550     551-750     751+  

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