

2023 Donation Request Form

Organization Information

Organization/Charity Name: *

La Jeunesse Choirs

Address (Including Postal Code): *

Box 925 Cobourg, Ontario K9A 4W4

Contact Information

First and Last Name of Contact Person: *

Denise Raymond

Title of Contact Person: *

Treasurer

Phone Number: *

[REDACTED]

Alt. Phone:

999-999-9999

Email: *

[REDACTED]

Donation Request Information

Total Request (\$) : *

\$900.

Date of Your Organization's Event: *

5/20/2023



Please provide your reasoning for the requested donation and description of how the funds will be utilized: *

We are requesting a donation to help us stage a production of "Disney's Descendants" in May of 2023. The past two years have been difficult as we struggled to keep our organization going during the COVID pandemic. By staging a musical, we hope to attract new children to our choirs. And get our membership levels back to pre-pandemic levels. The donation will help us with production costs such as sets, costumes and props as well as with advertising expenses.

Other Financial Information

Please indicate financial support you are expecting to receive from other organizations in 2023: *

We are applying to the Town of Cobourg for a grant as well. Since the production will be held at Victoria Hall, we are hoping to have a portion of our rent expense forgiven.

If Council approves your Donation Request, please indicate how the Municipality of Port Hope would be given recognition for this donation: *

If our request is approved, the Municipality of Port Hope would be given recognition on our web site and in our concert and musical programs.

Any additional information you find necessary:

The Municipality of Port Hope has generously given us donations in prior years. We would be most grateful for a donation in 2023 as well.

Should Council approve your Donation Request please indicate the following:

Preferred date to receive donation: *

10/14/2022



Payable to: *

La Jeunesse Choirs

Mailing address (Including Postal Code): *

Box 925 Cobourg, Ontario K9A 4W4

Special instructions (Optional):

First and Last Name: *

Denise Raymond

Please provide the date you are signing this document: *

9/20/2022



Please provide the signature of the authorized individual: *

D Raymond

Please complete and return your form by one of the following:

- Email: finance@porthope.ca
- Fax: 905-885-1807
- Mail: Town Hall 56 Queen Street, Port Hope, Ontario, L1A 3Z9
- Drop Box: On the front door of Town Hall 56 Queen Street, Port Hope

Personal Information on this form is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990 c. M56, as amended. Inquiries about the collection of personal information should be directed to the Municipal Clerk.