



INSPIRING COMMUNITIES APPLICATION FORM

This program is being maintained by Downtown Salmon Arm. For more information, please contact inspiringcommunities@salmonarmdowntown.com

PROJECT NAME: _____

CONTACT INFORMATION – PRIMARY CONTACT

Name:

*Address (include Postal Code):

*You must be a resident of Salmon Arm in order to qualify

Phone Number:

Email:

PROJECT DESCRIPTION

What is the proposed project? What do we need to know in order to understand what you are planning to do? Be clear and concise. What is your idea?

DOWNTOWN SALMON ARM
250 SHUSWAP STREET NE, PO BOX 1928
SALMON ARM, BRITISH COLUMBIA V1E 4P9



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Please specify detailed location of the event at Marine Peace Park (ie. by the gazebo)

Event Date

Event Start Time and End Time

Who is invited to your event?

How many people do you expect to attend?

*What would you like to use the Inspiring Communities Grant for?

*Maximum grant amount \$300

Where did you learn about the Inspiring Communities Grant?

Once you have submitted this form, a Coordinator will contact you to discuss your idea and talk about next steps in the application process

This form is being submitted electronically. If you prefer to print it out, please submit to inspiringcommunities@salmonarmdowntown.com

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