

The Halifax Ladies Musical Club

Established 1905

TALENT GRANT APPLICATION (Talent, Progress and Need are Considered)

(For **Instrumental** students under 18 years of age at date of application.)
(For **Vocal or Dance** students under 21 years of age at date of application.)

Name: _____

Address: _____
(Street) (City) (Postal Code)

Telephone: _____

Date of Birth: _____

Father: _____
(Name) (Occupation) (Telephone Number)

Mother: _____
(Name) (Occupation) (Telephone Number)

School: _____
(Name)

Teacher/
Professor: _____

Music Education

Category: _____

Teacher: _____
(Name) (Telephone Number)

Music Background – Examinations, Festival Results, Awards, etc:

Explain your Reasons for Applying:

References: 1) _____ Telephone: _____
2) _____ Telephone: _____

Student's
Signature: _____

CLOSING DATE NOVEMBER 17, 2017

Send Application to: Mrs. Daryl J. Chaddock
9 Forward Avenue
Halifax, Nova Scotia
B3P 1S3