



Saskatchewan Orchestral Association

Operating Grant Summary Form

(Updated 2016)

Important: Save your work in a Word file to avoid possible loss of data when saving the PDF file

Deadline: 90 days after fiscal year end

1. Contact Information:

Organization Name:		
Organization Chair Name:		
Organization Chair Address:	City:	Postal Code:
Organization Chair Phone: (306)	E-mail:	
Grant Contact Name:		
Grant Contact Address:	City:	Postal Code:
Grant Contact Phone: (306)	E-mail:	
Web Address: (if available) (ex. www.saskorchestras.com)		

2. Organizational Information:

Is your organization incorporated and currently in good standing with SK Corporations Branch? Y <input type="checkbox"/> N <input type="checkbox"/>		
Please provide incorporation #		
Fiscal Year of Organization	FROM (d/m): _____	TO (d/m): _____
Program Year for Grant (if different than fiscal year)	FROM (d/m/y): _____	TO (d/m/y): _____
Staff (employee and / or contract)	Number of full time staff: _____	Number of part-time staff: _____
Statistics: The * information below is requested by Saskatchewan Lotteries Trust Fund. It is combined with other member organization's information and submitted by the SOA through global funding reports.		
Programs: *Number of distinct programs offered:		
*Number of all program participants:		
*Number of program participants in the following age ranges: <i>(Estimations are acceptable.)</i>		
0-4 years _____	5-14 years _____	15-18 years _____ 19-29 years _____
30-54 years _____	55 + years _____	

4. Financial Information:

ACTUAL EXPENSES		ACTUAL REVENUE	
Administration:			
Administrative Salaries:	\$	Participant Fees:	\$
Stenographic Services	\$	Your Own Resources (list)	
General Office Materials	\$	1.	\$
Equipment Rental	\$	2.	\$
General Office Supplies	\$	Concert Ticket Sales	
Office Rent	\$		\$
Other (list):		Donations (list)	
1.	\$	1.	\$
2.	\$	2.	\$
3.	\$	Fund Raising (list)	
Promotion		1.	\$
Advertising (specify)	\$	2.	\$
Print Materials	\$	Federal Grants (list)	
Other (list):		1.	\$
1.	\$	2.	\$
2.	\$		
Professional Fees:		Provincial Grants (list)	
Clinician Fees	\$	1.	\$
Clinician Expenses	\$	2.	\$
Adjudicator Fees	\$		
Adjudicator Expenses	\$	Municipal Grants:	
Other:		1.	
1.	\$	2.	
2.	\$		
Other Expenses (list):		Other Revenue (list)	
1.	\$	1.	\$
2.	\$	2.	\$
3.	\$	3.	\$
4.	\$	Total SOA Grant:	
TOTAL EXPENSES: A \$		TOTAL REVENUE B	
Total Revenue(B)		B = \$ _____	
Minus Total Expenses (A)		A = \$ _____	
= Net Surplus/or Net Loss(C)		C = \$ _____	

5. Recognition of Funders:

The Saskatchewan Orchestral Association requires that the following funders' logos be displayed on all newsletters, publications, concert programs or any other promotional materials:

- Saskatchewan Orchestral Association
- SaskCulture / Saskatchewan Lotteries



Please submit copies of all promotional materials recognizing funders.

- Funder recognition is required for the final grant payment to be released.
- Ensure that the updated SOA logo is used.

6. Attachment Check List:

- a. **List of Board Members** – include position, address, phone number and email address
- b. **Narrative Summary**
- c. **Official Year-end Financial Statements**
- d. **Promotional Material Recognizing Funders**

7. Authorizing Signature: _____ **Date:** _____

<p>Please send this form and attachments to:</p> <p>Saskatchewan Orchestral Association, Inc. 2113 Clarence Ave. S Saskatoon SK. S7J 1L4</p> <p>or email info@saskorchestras.com</p>	<p>Questions?</p> <p>Check out www.saskorchestras.com Or contact: Elaine Kaloustian Phone: 306-716-5122 Email: info@saskorchestras.com</p>
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The SOA acknowledges the Saskatchewan Lotteries Trust Fund for Sport, Culture and Recreation, and SaskCulture for their support.

