



SCHEDULE "A"

MUNICIPALITY OF BARRINGTON  
APPLICATION FORM

GRANTS TO, CEMETERIES, COMMUNITY HALLS, FOOD BANKS, MUSEUMS AND OTHERS  
Maximum of \$500

NAME OF APPLICANT ORGANIZATION: BONNY CASTLE CEMETERY

CONTACT PERSON: CHAD HALLET

ADDRESS: 1219 CENTERVILLE - SOUTHSIDE RD

TELEPHONE: 907 320-3324 EMAIL: \_\_\_\_\_

NS REGISTRY OF JOINT STOCKS NUMBER: \_\_\_\_\_

FEDERAL CHARITABLE STATUS NUMBER: \_\_\_\_\_

1. Please indicate the grant amount for which you are applying: \$ 500.00

2. Please identify the community, area and/or group(s) your organization serves:

Upper Clyde and AREA

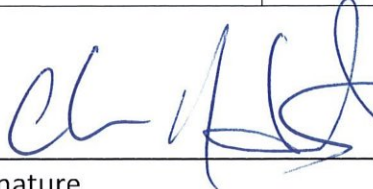
3. Please describe your organization's specific project/program/service:

General Maintenance and Mowing

4. Please provide a list of your membership including name, position, address and telephone number:

NAME	POSITION	ADDRESS	TELEPHONE

5. Authorization:

Application prepared By:  CAAD HAVETT 29/06/23  
(Contact Person)                      Signature                      Print                      DD/MM/YY

Board/Committee: \_\_\_\_\_ / / \_\_\_\_\_  
(Signing Officer)                      Signature                      Print                      DD/MM/YY

6. Submission:

MAIL: Municipality of the District of Barrington  
Grants Program  
P.O. Box 100  
Barrington, NS  
BOW 1E0

EMAIL: [info@barringtonmunicipality.com](mailto:info@barringtonmunicipality.com)  
DROP OFF: 2447, Highway #3, Barrington, NS  
ONLINE: [www.barringtonmunicipality.com](http://www.barringtonmunicipality.com)