



SCHEDULE "A"

MUNICIPALITY OF BARRINGTON
APPLICATION FORM

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

NAME OF APPLICANT ORGANIZATION: Barrington Cemetery Association
(Riverdale)

CONTACT PERSON: Julie Nickerson

ADDRESS: P.O. Box 416, Clark's Harbour

TELEPHONE: 902-637-8107 EMAIL: seasidejfn@hotmail.com

NS REGISTRY OF JOINT STOCKS NUMBER: _____

FEDERAL CHARITABLE STATUS NUMBER: 875 455 727 RR 0001

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:
Barrington West, Riverhead Road

3. Please describe your organization's specific project/program/service:
For the upkeep, maintenance & beautification of the
Cemetery.

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

NAME	POSITION	ADDRESS	TELEPHONE
Lea Jane Smith	President	Villagedale Road	902-635-0059
Rachel Nickerson	Secretary	Barrington	902-637-3227
Julie Nickerson	Treasurer	Clark's Harbour	902-637-8107
Charlene Stewart	Director	Barrington	902-637-3051
Ann Smith	Director	Villagedale Road	902-637-3397
Patty Hudson	Director Director	Barrington	

5. Authorization:

Application prepared By: Julie Nickerson Signature Julie Nickerson Print 22/07/24 DD/MM/YY

Board/Committee: Julie Nickerson Signature Julie Nickerson Print 22/07/24 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
 DROP OFF: 2447, Highway #3, Barrington, NS
 ONLINE: www.barringtonmunicipality.com