

Artist Residency Fee Confirmation Form

Complete and Attach to GATE Online Application

Name of Artist or Arts Organization: _____

Street Address: _____

City/Town: _____ Postal Code _____

Phone. No. _____
(Daytime) (Cell) (Evenings/Weekends)

Artist Email: _____

Artist's Fee: \$ + _____ = _____
Use the amt. in this box (GST if Applicable) (Total Artist Fee)
without GST to complete
the online Grant Calculation

Artist or Legal Representative of Company

School Authorized Representative

Name of Artist or Arts Organization

Name of School

(Artist Signature)

(School Authorized Signature)

(Print Name)

(Print Name and School Position or Title, ie. Principal)

Date _____

Date _____

Cell No. _____

Email _____

THE SCHOOL AND ARTIST OR COMPANY AGREE THAT:

1. This document does not constitute a binding Contract between the school and artist or company and is not a substitute for a Letter of Agreement or Contract;
2. The stated artist or company fee is the amount from an existing Letter of Agreement or Contract for the residency outlined in this grant application;
3. Completion of this form is for the sole purpose of this grant application.