

CONFIDENTIAL APPLICATION FOR ASSISTANCE

ARTIST EMERGENCY RELIEF FUND CENTER FOR THE ARTS-LAKE SUNAPEE REGION

NAME:	CFA Member: () YES () NO	
ADDRESS:	STATE:	ZIP:
EMAIL:	PHONE:	
ARTIST TYPE:		
What percentage of your overall income is from your work a	as an artist?	
Please describe the disaster causing you to lose income as	s an artist:	
How does this affect your ability to make your living?		
How long have you worked as an artist?		
Additional Sources of Income- ie: stocks, social security, P7	Γ employment, etc	
How would you utilize a grant from the Center for the Arts?		

Artist Emergency Relief Fund

If you were the recipient of a grant, would you be willi	ing to
1)"Pay it Back" at a later time, ()Yes () No	
2)"Pay it Forward" at a later time by providing an In-K	(ind service (ie: Performance) () YES () NO
How?	
Is there anything else that we should know about you	ır situation?()YES ()NO
If YES - please let us know more about you:	
I understand that this grant is a "Fund of Last Resort"	to assist artists in dire need.
I am requesting \$ (maximum grant allo	ocated is \$500.00)
I hereby certify that the statements and information a	re true and correct in all respects.
SIGNED:	DATE:
FMAIL COMPLETED APPLICATION TO 144 @ cont	of otherwise desired
EMAIL COMPLETED APPLICATION TO: info@centerline Include in Subject line: Application for Artist Emerger	
OR MAIL TO: Center for the Arts-Lake Sunapee Re Artist Emergency Relief Fund	
PO Box 872	-
New London, NH 03257	
() Reviewed by CFA Executive Committee	DATE:
Request Approved for: \$ / Reques	st Denied:

www.CenterForTheArtsNH.org