



Storytelling Toronto

Application for the Alice Kane Award

Please complete and mail to Storytelling Toronto, 601 Christie Street, Suite 173, Toronto, ON, M6G 4C7 by January 15, 2010. **Faxes will not be accepted.**

Name of Applicant(s) _____
Please print:

Address (one only)
Street and number _____

City/Province _____ Postal Code _____

Telephone _____ Fax _____

E-mail _____

Storytelling Experience:

Storytelling Affiliations:

I am a member in good standing of:

Storytelling Toronto

Storytellers of Canada-Conteurs du Canada

How are you planning on using the money if you are selected? Please include a working budget with your application

If you are selected, do you agree to submit to Storytelling Toronto a written article describing your experience within three months of its completion?

Yes _____ No _____

Are you aware that the recipient is encouraged to make a public presentation regarding his/her experience within the year? Possible locations include the Storytellers of Canada/Conteurs du Canada conference, storytelling festivals, local gatherings, or house concerts.

Yes _____ No _____



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On the reverse side of this application, please describe in no more than one page your proposed project.

Description of Project

Signature

Date