

CYO Bursary Application

Name of Youth: _____

Age of Youth: _____

Names of Parents: _____

E-mail of Parents: _____

Phone # and Address of Parents: _____

_____.

Number of Children in Family: _____

Occupations of Parents: _____

Name of School that Youth Attends: _____

Extra Curricular Activities of Student: _____

_____.

Paragraph explaining the need for a
bursary: _____

_____.

_____.

_____.

Please include last year's tax assessment and mail your application to:

Coquitlam Youth Orchestra
2050 Monterey Avenue
Coquitlam, BC
V3K 6T8

You will be notified of your status as soon as the CYO Board reviews your application.