

APPLICATION GUIDELINES

- Host must contact poet to request permission to apply for funding and confirm availability, prior to submitting application.
- Application and Administrative Fee payment must be made and submitted **by the host**.
- Administrative Fees per reading: \$25 per FULL (solo), \$15 per HALF (joint). Cheques payable to League of Canadian Poets.
- Administrative Fees will be processed for approved readings only, and are non-refundable.
- Limit of four (4) full readings per host per fiscal year.
- Limit of five (5) full readings per poet per two (2) fiscal years.
- Poets must be Full level League members and in good standing for minimum of two (2) consecutive years to be eligible (does not apply to Full members in their first year of membership).
- Membership Dues must be paid in full for current and previous fiscal year.
- Funding for cancelled readings is not transferable and will be redistributed by the League to pending applications.
- Applications must be received at least four (4) weeks before date of reading. Please allow 2 - 3 weeks for processing.
- Funding for eligible readings is distributed among all provinces and territories on first come first serve basis.
- **Please print clearly.** Incomplete/illegible applications will **not** be considered for funding.
- Submit applications **either** by email, mail **or** fax. Do not submit duplicates.
- For more information visit poets.ca/cpt RSVD. OVR LMT

DEADLINE: FEBRUARY 15, 2016 - 5:00 pm EST for readings taking place APRIL 1, 2016 - SEPTEMBER 30, 2016

1	POET NAME:	<input type="checkbox"/> LEAGUE RESERVED BOOK TOUR
	READING DATE (DD-MM-YYYY):	READING TIME: _____ : _____ am / pm
		<input type="checkbox"/> FULL <input type="checkbox"/> HALF
<i>FOR LEAGUE OFFICE USE ONLY</i>		
	M. LVL <input type="checkbox"/> 1ST YR <input type="checkbox"/> DUES PAID <input type="checkbox"/> LMT OK <input type="checkbox"/> APPR	INVOICE #
	NOTES:	<input type="checkbox"/> BK TOUR <input type="checkbox"/> OVERDUE <input type="checkbox"/> OVR LMT <input type="checkbox"/> RJCTD
2	POET NAME:	<input type="checkbox"/> LEAGUE RESERVED BOOK TOUR
	READING DATE (DD-MM-YYYY):	READING TIME: _____ : _____ am / pm
		<input type="checkbox"/> FULL <input type="checkbox"/> HALF
	M. LVL <input type="checkbox"/> 1 ST YR <input type="checkbox"/> DUES <input type="checkbox"/> RSVD. <input type="checkbox"/> OVR LMT <input type="checkbox"/> LMT OK <input type="checkbox"/> APPR	INVOICE #
3	POET NAME:	<input type="checkbox"/> LEAGUE RESERVED BOOK TOUR
	READING DATE (DD-MM-YYYY):	READING TIME: _____ : _____ am / pm
		<input type="checkbox"/> FULL <input type="checkbox"/> HALF
	M. LVL <input type="checkbox"/> 1 ST YR <input type="checkbox"/> DUES <input type="checkbox"/> RSVD. <input type="checkbox"/> OVR LMT <input type="checkbox"/> LMT OK <input type="checkbox"/> APPR	INVOICE #
4	POET NAME:	<input type="checkbox"/> LEAGUE RESERVED BOOK TOUR
	READING DATE (DD-MM-YYYY):	READING TIME: _____ : _____ am / pm
		<input type="checkbox"/> FULL <input type="checkbox"/> HALF
	M. LVL <input type="checkbox"/> 1 ST YR <input type="checkbox"/> DUES <input type="checkbox"/> RSVD. <input type="checkbox"/> OVR LMT <input type="checkbox"/> LMT OK <input type="checkbox"/> APPR	INVOICE #
		PROV. RQST APPR

FUNDED BY:



Canada Council
for the Arts
Conseil des arts
du Canada

CANADA POETRY TOURS
READING FUNDING APPLICATION

HOST (ORGANIZATION, UNIVERSITY, etc.):	CONTACT PERSON:
STREET ADDRESS:	CITY/TOWN:
PROVINCE:	POSTAL CODE:
PHONE:	EMAIL:
WEBSITE:	TWITTER:
READING SERIES NAME (if applicable):	INSTAGRAM:
VENUE:	CONTACT PERSON:
STREET ADDRESS: <input type="checkbox"/> Same as above	CITY/TOWN:
PROVINCE:	POSTAL CODE:
PHONE:	EMAIL:
WEBSITE/TWITTER:	EVENT COVER CHARGE: (\$)
ADMINISTRATIVE FEE _____ HALF READINGS x 15.00 \$ _____ _____ FULL READINGS x 25.00 \$ _____ DONATION \$ _____ TOTAL \$ _____	PAYMENT INFORMATION <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Cheque Enclosed NAME ON CARD: _____ EMAIL FOR E-RECEIPT: _____ CARD #: - - - EXPIRY DATE (MM/YY): / CVV/CVC:

HOST CONSENT

I consent to receive electronic communications from the League of Canadian Poets.

I DO NOT consent to receive electronic communications from the League of Canadian Poets.

NOTE: You may withdraw your consent to receive electronic communications from the League of Canadian Poets at any time by emailing your request to readings@poets.ca or calling 416-504-1657.

NAME: _____ SIGNATURE: _____ DATE: _____

FOR LEAGUE OFFICE USE ONLY			
HOST	<input type="checkbox"/> OVR LMT	<input type="checkbox"/> LMT OK	<input type="checkbox"/> PMT
	AMT (\$)		TRANS.#
NOTES:			

APPLICATION SUBMISSION

EMAIL: READINGS@POETS.CA FAX: 416-504-0096

MAIL TO: THE LEAGUE OF CANADIAN POETS
192 SPADINA AVE, SUITE 312, TORONTO, ON M5T 2C2