

Lions Of Alberta Foundation

SIGHT FUND APPLICATION

Club Name					
Address					
Town / City	Prov	P/C			
This application is being ma	ade by the Club Officer	named:			
Name	Officer Title:				
Telephone #	Office#				
Email Address:					
This Application is being ap Name of organization / Individen	-				
Town / City	Prov	P/C			
Contact Person:					
Telephone #	Email:				
Date of application					
Signature of Club Officer					



— 4 · · ·	•		• •	4 .	
Lintaile	\sim t	20	nlia	~atı	nn:
Details	OI.	av	viit	Jau	UII.

Please provide details of the project:

Cost of the overall project (a budget breakdown):

Where the equipment will be located:

What individual(s) or community will benefit?

Is any other agency or service club providing any funding?

- ➤ Attach all supporting material (Photocopies acceptable)
- We require copies of literature on the type of equipment being purchased

Support of the Lions of Alberta Foundation is subject to approval by the Board of Directors and the availability of funds, and the conditions stated above.

Mail:

Lion Dave Leshchyshyn, Coordinator

c/o Lions of Alberta Foundation
44 Lakeview Crescent
Sylvan Lake AB T4S 1J7

Email: dleshchy2324@shaw.ca