

**FALL 2021 / WINTER 2022 GATHERINGS GRANT APPLICATION**

Deadline: submit this application form by email to [programs@gcna.org](mailto:programs@gcna.org) by August 1, 2021

**HOST INFORMATION**

Host institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City and province/state: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of contact person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**DETAILS ABOUT THE FALL 2021 / WINTER 2022 GATHERING**

Date(s) of the gathering: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date(s) must be between September 15, 2021, and March 31, 2022

Masterclass instructor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your event must include at least 90 minutes of masterclasses, in one or

more sessions.

On a separate page, please provide:

1. **Details about your carillon**: number of bells, bellfounder(s), year(s) of installation, most recent year of renovation, most recent date of maintenance visit, and other general information about the state of repair of the carillon.
2. A draft **schedule** of events. Other than the required masterclass, the events are up to you: recitals, open tower times, lectures/presentations, discussions about collaborating on regional projects/events or outreach to less developed or dormant carillon programs in the area, social time, etc. Be creative!
3. Information about the **registration fee**, if any, and what it covers (e.g. meals).
4. A short **biography** (max. 100 words) of the masterclass instructor, highlighting their experience as a carillon teacher and/or masterclass instructor.
5. A **budget** that lists expected revenue (e.g. registration fees, contribution from host institution, grants from local arts councils, etc.) and expenses (e.g. catering, honorariums, staff, etc.).
6. A short description (max. 100 words) of any relevant **experience** that you or your organization may have in organizing a carillon congress or gathering, or similar event.

**GRANT REQUEST**

The amount requested: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (maximum $750)

**TERMS AND CONDITIONS**

If a grant is awarded to the applicant, the applicant agrees to the following terms and conditions:

* The registration for the gathering must be open to all GCNA members.
* The applicant agrees to offer at least 90 minutes of masterclasses, in one or more sessions.
* The applicant is responsible for all aspects of hosting and organizing the gathering, including the requirement to abide by all public health regulations concerning public gatherings.
* The applicant agrees not to publicize the gathering as an official GCNA event, nor to represent the GCNA as a host or organizer of the gathering.
* The applicant agrees to recognize the GCNA as a financial supporter of the gathering in publicity and registration materials, webpages, program booklets, and similar materials.
* The applicant may request disbursement of the grant from the GCNA Treasurer either (a) up to 14 days before the gathering, or (b) after the gathering. If the applicant requests disbursement before the gathering, the applicant must certify at the time of the request that the applicant knows of no reason (including public health restrictions) why the gathering cannot take place.
* If the applicant cancels the gathering for a pandemic-related reason, the GCNA will disburse up to $100 to assist in covering expenses relating to the cancelation.

**CERTIFICATION**

By signing below:

* I certify that all of the information on this form is accurate and complete to the best of my knowledge;
* I certify that I am authorized to sign on behalf of the host institution; and
* I and the host institution agree, if awarded a grant, to the above terms and conditions.

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Applicant’s Signature (e-signature permitted) Date