

Canada Youth Participant Grant

Synod of British Columbia

For participants in Youth Track, Discipleship Track, Youth Ministry Training Track

and Adult Advisors

First Name:	Last Name:		
Telephone Number:			
Congregational Contact Name:	Congregation:		
Total Cost of Participating at Canada Youth (not includin	g spending mc	oney and meals during tra	avel)
Cost Description		Cost	Credits
CY Registration			
Travel (by plane)			
Travel (other)			
Total Cost:			
Subsidy Description			
From Participant (and Family)			
From Congregation			
From Presbytery			
From other			
Total Subsidy:			
Consideration of the constant			
Synod Grant:			
Note: Grants will be considered by the following Criteria			
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1) Threshold of Participation: Does the Synod Grant or amount of			
2) Geography: Participants from remote areas will have longer to travel (usually to Vancouver or Prince George) and so have extra costs.			
3) Family/Congregational Support: Is this participant, either through	gh family or congr	regational support, already we	ell subsidized?
Please send completed grant applications to the Synod F	- inancial Mana	ger, Ms. Annette Pardais	s (250) 391-2955:
Annette Pardais c/o 3486 Fulton Rd., Victoria BC; V9C 3N	N2; Or scan an	d email to : sfmsynodofb	c@gmail.com
Congregational name to appear on Synod Cheque if grar	nt is issued:		
Mailing address:			

For more information, please contact the Synod Clerk at 250-564-6494