

2025 LCF PROJECT PROPOSAL

This application is to be completed by LCF Member Organizations
that are not registered charities in Canada

This sheet only needs to be completed once

Applicant Information

Organization name: _____

Contact person name and title/position: _____

Complete mailing address: _____

Telephone #: _____

E-mail address: _____

Organization's LCF Membership #: _____

Incorporation date and number (if incorporated): _____

Date organization established (if not incorporated): _____

Primary purpose of organization: _____

Number of active members: _____

2025 Project Name(s), Funding Requirement(s) and Priorities

If funding is being requested for more than one project, please rank the projects in descending order of priority.

Project Priority	Project Name	Funding Required
Priority #1		
Priority #2		
Priority #3		
Priority #4		

Declaration

I confirm that the information contained in this Project funding application is true, accurate and complete. I acknowledge that if the Project funding application is approved, it will be necessary for this Organization to enter into a legally binding agreement with the Lithuanian Canadian Foundation which outlines the terms and conditions of the project funding and details the Lithuanian Canadian Foundation's financial commitment.

I agree that the Lithuanian Canadian Foundation may use the name of the Organization and/or its logo in promoting the Lithuanian Canadian Foundation's activities. I accept the Project Guidelines and I have authority to bind the Organization. This signature is the legal equivalent of a manual signature.

Full Name (type) _____
Date

Position

This signature is the legal equivalent of a manual signature.