ATVANS
ATV ASSOCIATION OF NOVA SCOTIA

Small Grant Program Application Form

Zone #_____ **Club Name** _____

Contact person _____
(Please print)

Contact # _____ Email_____

Address of contact person _____

Nature of project ☐ Maintenance ☐ New trail development ☐ Other

Permitted users ☐ ATV ☐ ORM ☐ Snowmobile ☐ Non-motorized
(check all that apply)

Amount requested _____ (Please attach budget and cost breakdown)

Description of project

(If you need more space please attach document)

Signature _____ Title / Position _____

Print Name _____

April 3rd, 2016