**BC Yukon Area 79**

bcyukonaa.org

General Service Committee

P.O. Box 42114 Vancouver BC V5S 4R5 Tel 604-534-2181

**Group & District Remote Communities Subsidy Application**

|  |  |
| --- | --- |
| Date |  |
| Group or District # or group name and Location |  |
| Contact Name |  |
| Contact’s Group Position  |  |
| Contact Person Phone number |  |
| Contact Person email address |  |

**Please answer the following questions. Use a separate page if necessary.**

Explain the specific use of the equipment being requested?

How will your group members be benefited by this equipment?

How will the subsidy enable your group to carry the A.A message of recovery?

**Please provide the following budget details. Fill in only those items that apply to your specific situation.**

*If there is any other information you feel we need to know, please attach it to this application form.*

|  |  |
| --- | --- |
| Cost of product(s)  |  |
| Other costs |  |
| **Total Cost** (add up all your costs) |  |
| Group/District contribution |  |
| **Subsidy Requested** (Subtract Contribution from Total Cost) |  |

**Send completed form to:**

By Email:

remotecommunities@bcyukonaa.org

By Mail:

General Service Committee

P.O. Box 42114

Vancouver BC

V5S 4R5

*All applications will be acknowledged.*