

Non-Profit Sector Supplement Application Form

Contact Information

Applicant name:	
Contact person:	
Physical address:	
Mailing address:	
Telephone:	
Email:	

Funding Request Summary

Amount of funding request:	
Total operating budget:	
Fiscal Year that request applies to:	

Applicant Description

Please describe the work that your organization does and how it applies to either the Tourism or Culture sectors.



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Summarized Operating Budget projected to year-end (for fiscal year of request)

Applicants must also submit board-approved financial statements for year of request (interim acceptable) and for previous completed fiscal year.

Expenses	Amount
Fees/Salaries/Wages/Honoraria	
Projects and Programming	
Marketing	
Operations and Maintenance	
Capital	
Other	
Total Expenses	\$
Revenues (please identify any funding by name of program)	Amount
Total Revenues	\$
Total Loss in Dollars	\$
Loss as a Percent of Total	
Request to Non-Profit Sector Supplement (max \$20,000)	\$



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Organizational structure

Please include a description of your organizational structure (staff, board, volunteers, infrastructure, etc.)

Impact of COVID-19

Please describe how the pandemic has impacted the operations of the organization. Please include financial impacts.

Declaration of applicant:

We are/I am submitting this application for the purpose of obtaining financial assistance from the Non-Profit Sector Supplement program, administered by Yukon Historical and Museums Association. The statements herein and in all further submissions in regard to this application are, to the best of our knowledge, true and correct. We/I submit that, to the best of our knowledge, all aspects of our operations are in compliance with existing municipal, territorial and federal codes, guidelines and laws.

We/I consent to our/my application being copied and retained by YHMA for the purpose of adjudication and administration of the fund. We/I understand that successful applicants, locations and amounts will be shared with the public. We/I understand that more detailed information may also be shared with Government of Yukon as part of the terms of Yukon Historical and Museums Association administration agreement for this program. Non-identifying information may be distributed for the purposes of public statistical reporting.



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The applying organization has operated in Yukon and has been registered with Yukon Corporate Affairs for at least one continuous year before applying. The applying organization is currently in compliance with Yukon Corporate Affairs. I have the authority to sign this request on behalf of my organization.

Signature: _____ Date: _____

Complete the application form and submit it to the Yukon Historical and Museums Association prior to **February 8, 2021**.

Applicants must include board-approved financial statements for the year for which funding is being requested and for the previous completed fiscal year. Applicants are welcome to submit supplementary information.

Please discuss your application in advance at:
867-334-9655 or npss@heritageyukon.ca

Applications may be submitted by:
email to: npss@heritageyukon.ca
Mail: 3126 3rd Avenue, Whitehorse, YT, Y1A 1E7
Fax: 867-667-4506

*Financial Statements should consist of an Income Statement (Profit and Loss report) and Balance Sheet.



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