PNA Performing Arts Subsidy Application

Applicant Information

Email

Name of Performing Arts Group

Group Mailing Address - Street Address

City **State** **ZIP Code**

Group Telephone

PNA Lodge, Council, or District Number (if applicable; if not, enter N/A)

To whom should the subsidy check be made payable?

Rehearsal Information

What day(s) and time(s) are rehearsals held?

Where are rehearsals held?

Facility / Location Name

Street Address

City **State** **ZIP Code**

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Group Information

What is the total number of members in your group?

How many current PNA Beneficial Members are enrolled in your group?

How many public appearances or performances does your group make per year?

Please list your group's appearances/performances from the past six months.

Include Event/Performance Name, Location, and Date.

Please provide links to recent group activity.

Examples: website, social media posts, online articles, reviews, or event pages.

Supporting Materials

Please attach or submit separately files showing recent group activity, such as photographs, flyers, advertisements, programs, newspaper articles, or other supporting materials.

☐ Supporting materials are attached / submitted with this application.

PNA Performing Arts Subsidy - Group Roster

Please list group members below. Enter first name and last name only.

First Name	Last Name

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Acknowledgements

Accuracy of Information

I certify that all information provided in this application is true, accurate, and complete to the best of my knowledge. I understand that falsifying information or providing inaccurate or misleading information, including information regarding PNA membership, may result in disqualification from the current application cycle and may affect eligibility for future PNA subsidies or sponsorships.

☐ I agree.

Funding Approval and Availability

I understand that submitting an application does not guarantee approval or funding. The Polish National Alliance (PNA) retains full discretion in determining eligibility, approving applications, and allocating subsidy funds. Subsidy programs, eligibility requirements, and funding amounts are subject to change, modification, or withdrawal at the discretion of the PNA.

☐ I agree.

Recognition of PNA Sponsorship

If my group receives a subsidy or sponsorship, I agree to recognize and promote the Polish National Alliance as a sponsor of our group, including appropriate acknowledgment in promotional materials, social media, events, performances, or other applicable communications. I understand that failure to appropriately recognize PNA support may affect my group's eligibility for future subsidies or sponsorships.

☐ I agree.

Certification and Signature

I certify that the information provided in this application is true, accurate, and complete to the best of my knowledge. By signing below, I confirm that I have read, understand, and agree to all acknowledgements, terms, and requirements outlined in this application.

Name of Person Completing Application

Title / Position

Signature (type full name)

Date