Donated Services Form

This form is to be completed by the artist or service provider who is donating services to the applicant. Please provide detailed information about the donated services.

Applicant Information

- Applicant Name: ______
- Project Title: ______
- Date: _____

Donor Information

- Donor Name: _____
- Business Name (if applicable): ______
- Address: ______
- City/Province: ______
- Postal Code: ______
- Phone Number: ______
- Email: _____

Details of Donated Services

Description of Services	Hours Donated	Hourly Rate	Total Value (\$)

Total Value of Donated Services: \$ _____

Declaration

I, the undersigned, certify that the above services will be donated to the applicant for the purpose of the project described. I understand that this declaration does not constitute an obligation on the part of Music PEI to accept this donation.

Donor Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

Please return this completed form to Music PEI along with your application or completion report.