



2026 LCF GRANT APPLICATION
 (For LCF Member Organizations that are registered charities in Canada)

FORM A: APPLICANT INFORMATION

Official name of Registered Charity: _____
 Business/Charity #: _____
 Committee, Section, Affiliate or Program Name (if applicable): _____
 Contact person name: _____
 Contact person title/position: _____
 Mailing address: _____
 Telephone #: _____ E-mail address: _____
 Organization's LCF Membership #: _____

2026 Project Name(s), Funding Request(s) and Priorities

If funding is being requested for more than one project, please rank the projects in descending order of priority.

Project Priority	Project Name	Funding Requested
Priority #1		
Priority #2		
Priority #3		
Priority #4		

Declaration

I confirm that the information contained in this Grant Application is true, accurate and complete. I acknowledge that if the Grant Application is approved, it will be necessary for this Charity to enter into a legally binding agreement with the Lithuanian Canadian Foundation (the "Foundation") that outlines the terms and conditions of the grant and details the Foundation's financial commitment.

I agree that the Foundation may use the name of the Charity and/or its logo in promoting the Foundation's activities. I accept the Grant Guidelines and I have authority to bind the Charity.

I am a member of the LCF Board of Directors or an LCF employee.

Signature _____ Position _____
 typed name is the legal equivalent of a manual signature

Print Name _____ Date! _____