

Student Membership Grant Application Form

*Please note the rules on the website that apply to make a request for this grant to pay for your RCCO student fee.

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CANADIAN COLLEGE OF	Salutation: (check one)	Mr.	Mrs.	Miss.	Ms.	Rev.	Dr.
Name:							
Addres	s:						
City:					l Code: _		
Phone	(home):	Phon	ne (cell):			_	
Email 4	Address:						
Name o	f Organ Teacher:						
Email A	ddress of Organ Teacher:						
Submit this form to: RCCO Ottawa Centr	e, P.O. Box 2270 Stn D , Ot	ttawa K	1P 5W4,	ON			
OR Send this inform	ation via email to the Cent	re Trea	surer <u>tre</u>	asurer@	rcco-ott	awa.ca	

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The Centre Treasurer will indicate if you are eligible to receive the grant.

Once you have renewed your student membership with the RCCO National Office, you will be reimbursed your student membership fee by the Centre Treasurer.

You will receive Organ Canada and the monthly Ottawa Centre Pipelines as a member.