GRANT APPLICATION FORM

Name Of Applicant		
Must be 18 years or older		
Title:	First:	Last:

Your Contact Information	
Address:	
Telephone:	Email:

Your Organization's Information (If applicable)	
Name:	Contact:
Address:	
Phone:	Website:
Email:	Social: (Facebook, Instagram, etc)
What is the amount that you are applying for?	

Give Us A Summary On How The Grant Will Be Used Specifically Who Will Benefit

Applicant Signature

Board Approval Yes_____ / No_____	Date Approved:
Amount Approved _____	Vote: Yays_____ / Nays_____
Board President Signature:	