

## Grant Request Form

Date: \_\_\_\_\_

Please complete items A thru D below. Feel free to use space on the back if needed or add an attachment.

A. Requesting Organization Name:

\_\_\_\_\_

Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Requesting Organization Contact Info:

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

B. Explain how the requesting organization's proposed project fits within the mission of The Association.

C. Indicate a total requested amount and furnish an itemized list of how the funds will be spent.

D. Provide any additional information that The Association should consider in making a decision about the requested grant.