



GRASS ROOTS GRANT APPLICATION



\$1,000 Grant Application (2022-23 Hockey Season)

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|---|--------|-----------|--|
| Application Date: | | | |
| Name of Association: | | | |
| Applicants Legal Name: (as shown on IRS Letter of Determination) | | | |
| EIN #: | | | |
| Address: | | | |
| City: | State: | Zip Code: | |
| Name of Person Submitting Application: | | | |
| What position do you hold in your Association? | | | |
| Telephone #: | | | |
| Email address: | | | |
| Associations tax exempt status/IRS designations: 501 3C, 501 C 9, etc | | | |
| If not a 501 3C Nonprofit, then who is fiscal agent? | | | |
| Circle category you are applying for: Goalie Equipment, Dryland Training, Intermediate Nets or Helmets | | | |
| Purpose of funding request. Please describe: | | | |
| What do you hope to accomplish (outputs and/or outcomes: | | | |
| How do you intend to accomplish the above: | | | |
| What is the cost of the Project: | | | |