Confidential

EL PASO COUNTY 4-H FOUNDATION

Request for Foundation Funds

NAME: _____ CLUB: _____

ADDRESS: _____ PHONE: _____

YEARS IN 4-H as MEMBER/LEADER: _____ DATE: _____

TOTAL COST OF FUNCTION: _____ AMOUNT REQUESTED: _____

BRIEFLY EXPLAIN THE REASON FOR REQUESTING FUNDS:
(include the 4-H activity involved; funds may only be used for 4-H activity/event) _____

_____

_____

_____

EXPLAIN THE SERVICE PROJECT YOU WILL COMPLETE AS A REQUIREMENT OF RECEIVING THE FUNDS: (example: in kind, presentations to other clubs/community groups, newsletter/newspaper articles, assisting with county 4-H activities, assisting with Foundation fundraisers, etc.)

_____

_____

_____

COMMENTS FROM CLUB ORGANIZATIONAL LEADER:
(if applicant is 4-H member or project leader; please attach on separate sheet).

_____

_____

_____

I agree to fulfill the terms outlined above. If I am unable to do so, I understand the Foundation may request repayment.

_____ _____ _____

Applicant's Signature Date Parent/Guardian Signature

* *

The above request is granted in the amount of $_____ dependent upon the completion of the agreed upon service project within six months of participation.

_____ As presented by applicant - OR - _____ As amended below

Amendments by Foundation, if any: _____

_____

_____ _____

Foundation President Signature **Date**

Please return application form to: El Paso County 4-H Foundation, c/o Mary Gieseker, Treasurer, 1524 Zaiger Place, Colorado Springs, CO 80915, or e-mail to epc4hfoundation1@gmail.com a minimum of thirty (30) days prior to attending the event.

El Paso County 4-H Foundation reserves the right to consider applications on an individual basis in emergency situations.