



THE ROTARY CLUB OF EAST LAKE SUNRISE
CHARITY GRANT APPLICATION

TO: The Rotary Club of East Lake Sunrise Charitable Giving Committee

Please consider support of (please indicate the legal name of the 501(c)(3) organization):

ADDRESS: _____

Street City State Zip

TELEPHONE: _____ FAX: _____ EMAIL: _____

GOAL: Indicate below the purpose/goal of this organization and reasons the organization should receive a portion of the fund raising efforts of our club this Rotary year (attach additional pages if needed):

VOLUNTEER SUPPORT: Please indicate how your organization may be able to support our Golf Tournament and/or Car Show: _____

ANTICIPATED COST OF PROJECT: \$ _____ REQUESTED AMOUNT: \$ _____

With this application, please enclose additional support materials deemed appropriate.

CERTIFICATION: We hereby certify that the information contained in this application, including all attachments and supporting materials, is true and correct to the best of our knowledge. (Individual signing below must be authorized by the organization to so certify on its behalf):

SIGNATURE: _____ DATE: _____

NAME (Printed): _____ TITLE: _____

*Note: Should your organization be approved for support from The Rotary Club of East Lake Sunrise, they can **in no way** be guaranteed a definite amount as we cannot estimate the net amount our fund raisers will attain. Organization(s) approved for support may expect notification of such as well as the percentage award of the net amount attained through our fund raising activities.*

APPLICATION SUBMISSION:

Applications may be mailed to Committee Chair Christina Rankin at 1010 Drew Street, Clearwater, Florida 33755, or hand delivered to any member of the club's Charities Committee (Doug Edwards, Bob Host, Marie Miller, Christina Rankin, or Ray Shaw).