



2011 Carlton's Walk in the Park - Donation Request Form

Please return form to CWiP, PO Box #99, Carlton, OR 97111 with postmark on or before September 6, 2011. Please type or write legibly, please use extra pages for additional information may be added as needed.

Organization: _____

Mission Statement or Purpose:

What is your Organization's total operating budget: \$ _____

What are your Organization's current funding sources?

What is the amount of funds are you seeking? \$ _____

Please provide a brief description of the project / program for which you are requesting funding, and a brief timeline for implementation:

If this is a new project, or an ongoing program? If ongoing, please explain how it has been funded:

Please estimate the number of people in Carlton and Yamhill that will be served by the proposed program, and explain how you arrived at this number:

Describe other support you have for this program (support is identified as additional funding or donations, volunteer hours, use of buildings, etc.):

Did board members, staff, or others directly related to your organization volunteer at Walk In the Park this year? If so please list their names and affiliation with your organization:

Please provide names and contact information for the people responsible for oversight and implementation of the proposed project:

<u>Name</u>	<u>Phone</u>	<u>Email:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you received funding from Walk In The Park in the past? YES _____ NO _____
If so, how much? \$ _____

Please provide evidence that past funding has been used for the purposes intended in previous years requests

Does your organization have non-profit 501c3 status? If so, please provide the federal ID number:	YES _____ NO _____
Do you have published organizational by-laws?	YES _____ NO _____
Do you hold regular meetings that are open to the public?	YES _____ NO _____
Are meeting minutes / records on file and available for review?	YES _____ NO _____

_____	_____
Name / Signature of Person submitting this application	Contact Phone