



USTA Nebraska Community Tennis Development Grant Application

☐ **Cycle One: January 1 - April 30** ☐ **Cycle Two: May 1 - November 15**

Which grant are you applying for? Please Check One: <input type="checkbox"/> Junior Team Tennis <input type="checkbox"/> Tennis on Campus <input type="checkbox"/> 10 and Under Tennis <input type="checkbox"/> Junior Recreation <input type="checkbox"/> Adaptive <input type="checkbox"/> Diversity <input type="checkbox"/> Other <small>*Grants are up to \$500</small>		
Organization Affiliation:		
USTA Organization Membership ID#:		
Telephone:		Organization Federal Tax ID:
Email (required):		
Organization Address:		
City:	State:	Zip:

Program Description

Describe in the space below how your program will utilize funding from the USTA Nebraska. Be specific.

- Planned program dates: _____
- Number of players included in this program: _____
- Inclusion of 8 & Under or 10 & Under programs utilizing QuickStart format: ☐ Y ☐ N
- Will **TennisLink** be utilized for Team Tennis or QST Tournaments? ☐ Y ☐ N
- Promotion materials and methods (describe):
- Community Partners/Sponsors (List schools, P&R, Boys & Girls Club, YMCA/YWCA, etc):

Return to TROY SAULSBURY
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