

Cleveland Championships 2000 Fund Group/Program Application

Applicant's Name: _____ SS ID# _____

Organization Name: _____ Tax ID# _____

Address: _____

Phone: _____ City/State/Zip: _____

Home Club: _____

Project Title: _____

Amount requested: \$ _____

Funding period of request: _____ through _____

Is this a new or existing program? New _____ Existing _____

If existing, number of years in existence: _____

Project summary: _____

Unless otherwise indicated, grant checks for approved projects will be made payable to the organization/club/institution and program (i.e. "Any Skating Club – We Need the Money Program").

(Please note: A 1099 tax form will be sent to the recipient of any grant at the end of the year. Grant recipients should consult their tax advisors concerning the income tax consequences of receiving a grant):

Who the grant check should be written to: _____

I attest that this proposal is intended to foster, support, develop and promote amateur figure skating in the Greater Cleveland, Ohio area. This proposal has received the endorsement of this organization (if applicable) in principle and is accurately described in this Application.

Signature: _____ Date: _____

Club Officer/Organization Official _____ Date: _____

RETURN THE ORIGINAL AND TWO COPIES OF THE APPLICATION

Completed Applications should be sent to the current Secretary of the Greater Cleveland Council of Figure Skating Clubs. This address can be found at www.clevelandskating.com (About Us – Council Leadership).

9/1/2009