



Henniker Rotary Club  
P.O. Box 695  
Henniker, NH 03242

### DONATION REQUEST FORM

Applicant Name: \_\_\_\_\_  
Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Contact name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email address: \_\_\_\_\_

Reason for Request: \_\_\_\_\_ Donation needed by \_\_\_\_\_  
(date)

The Henniker Rotary Club is a non-profit humanitarian/community service organization.  
How would our community benefit from this donation?

Will the applicant be available to attend a Henniker Rotary Club meeting (Thursdays,  
7:30 a.m. at Henniker Congregational Church Parish Hall to receive the requested  
donation (if approved)?  Yes  No

Request presented to club Grants Committee on \_\_\_\_\_  
(date)

Grants Committee approvals \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Grants Committee approval amount \$ \_\_\_\_\_ Board of Directors approval on \_\_\_\_\_

Board of Directors approval amount \$ \_\_\_\_\_ For the Board of Directors \_\_\_\_\_

Check No. \_\_\_\_\_ Presentation on \_\_\_\_\_ (signature)  
(date)

***This application is the Henniker Rotary Club's invitation to request donations. Based on the information provided, the Henniker Rotary Club, at its sole discretion, will approve or not approve this request.***