

2024 Community Giving Grant Application Form

PART 1: Organization

Name		
Address		
City Sta	te Zip	
Telephone	Fax	
Website	Email	
Primary Contact	Title	
Other Contact	Title	
PART 2: Organization Data		
Organization Purpose:		
Geographic Area Served:		
Year Founded IRS Tax Dete	ermination Code	

Employer Identification Number (E.I.N.)
PA Bureau of Charitable Organizations Registration #
Are you affiliated with a religious organization?
If Yes, which one:
PART 3: Funding Request
Request Date
Have you received a grant from Colonial Park Rotary in the past?
Organization Overall Budget:
Colonial Park Rotary Contribution Request:
A. General Operations/Administrative Request
OR B. Project/Program Request
Describe Project/Program:
How many people will be served:
Will priority be given to serving people in the Colonial Park area, if so, how?

PART 4: Promoting Colonial Park Rotary

Have you/your organization participated in any of the following events: (Check all the apply)

sor Food Vendor Exhibitor Other:
olfer Sponsor Other:
villing to participate
in the future tag, like or share the Colonial Park cebook page or website?
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Are you able to help promote the Colonial Park Rotary in any other way?

PART 5: Followup

Please send photos or written verification if money given to you was used for the purpose requested.

Return completed form to: Marianne Flickinger at: MPeters@hbgsd.us

-or-

Rotary Club of Colonial Park
Attn: Marianne Flickinger

P.O. Box 6522

Harrisburg, PA 17112

Applications are due by May 1st.