

Rotary Club of Moline – Application Cover Sheet for Request of Funding

Agency Name:

Date of Request:

Location Address:

Mailing Address:

Phone:

Contact Person and Title:

Email Address:

Web Address:

Have you received funding from the Rotary Club of Moline in the past? (check one) Yes No

If yes, what type of support have you received? Please comment on dates, amount and type of support.

(Use an additional sheet if necessary?)

Is this an annual event/program? (check one)

Yes No

Amount of requested funds:

Signature of Applicant:

Printed Name of Applicant:

Submit to:

Community Programs Committee

C/O Rotary Club of Moline

PO Box 964

Moline, IL 61266-0964