

REQUEST FOR FUNDING

Please note that requests need to be received at least 60 days in advance. Funding is not automatic. Verbal requests or perpetual funding will not be entertained. Please send to: Rotary Club of Baldwinsville, P.O. Box 713, Baldwinsville, NY 13027.

Feel free to attach additional pages if needed.

Date:	Organization:
	Title:
Address:	
Phone:	Fax:
Email:	

1. Name of Project/Program: _____

a. Please describe the project/program and be specific as to what the dollars will go toward.

b. Describe the need or problem your project seeks to address and for whom it will serve and where.

c. Include why this funding is needed along with what other efforts you have made for additional funding.

2. Amount Being Requested: \$_____

3. Describe how the Rotary Club of Baldwinsville's gift will be recognized: