

Rotary District 5870 Keyway

APPLICATION

1.	Rotary Club of:		
2.	Project Name:		
3.	Estimated Start Date:	Estimated Finish Da	ate:
4.	Estimated Funds to be collected:		
5.	Description of Project:		
6.	Project Chairperson:		
	Phone:	Email:	
7.	Club President Name:		
	Phone:	Email:	
	President's Signature:	Da	te:
D58	370 Keyway board use only:		
Approved		Disapproved	
Cor	mments:		