



Application for Funds  
From the  
Rapid City Cosmopolitan Club

Name of Organization \_\_\_\_\_

Address \_\_\_\_\_

Contact Person and Phone Number \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Amount Requested \_\_\_\_\_ What percent of your total budget will this amount equal? \_\_\_\_\_ Have  
you received funds from the club before? **Yes** **No**

Purpose for the funds if they are received:

Other Funding Sources:

Copy of a financial statement should be attached.

Date submitted \_\_\_\_\_

**Cosmopolitan Club use only:** Date received \_\_\_\_\_ Deadline: April 30<sup>th</sup>.

*Mail to Rapid City Cosmopolitan Club  
P.O. Box 994,  
Rapid City, SD 57709*