



Rotary Club of Green Valley

Request for Funding Application

All applicants to complete and mail or email to the Chair of the Charity Committee
Rotary Club of Green Valley, 10624 S. Eastern Ave. A-7 Henderson NV 89052

Name of the Organization: _____
Address: _____
City: _____ State: _____
Primary Contact: _____ Telephone: _____
Email Address: _____

Requested Amount: _____

Purpose and Mission of the Organization: (Please attach additional information, brochures, etc.)

Is the organization a 501(c)(3) or similar non-profit as designated by the IRS?
If yes, Tax Payer ID#: _____ (Please attach copy of IRS 990)

What will be the specific use of these funds?

Who will be served by these funds? (Please include specifics age, gender, single parent, educational level, economic level, minorities, etc.)

Geographically, where will these funds be used: _____

Are there any volunteers or joint venture opportunities that could be shared with the Rotary Club?

Submitted By: _____ Date: _____
Sponsoring Rotarian: _____ Date: _____