



## Kiwanis Funds Application Form

To be completed by applicant and returned to Crystal Lake Kiwanis Club for consideration.  
Please include copy of your 501(C)(3) exemption certificate.

Date: \_\_\_\_\_

Name of Charitable Organization: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_ Contact: \_\_\_\_\_

Number of years in business: \_\_\_\_\_ Number of (unduplicated) children served \_\_\_\_\_

Purpose of fund request: \_\_\_\_\_

\_\_\_\_\_

### Following to be completed by Kiwanis Club Board Member:

Review Date: \_\_\_\_\_ Amount Approved: \_\_\_\_\_

Board Member Approval: (Signature) \_\_\_\_\_

(Signature) \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_