



Venice Yacht Club Charitable Foundation Grant Request Form

I. Applicant Organization

Date _____

Organization Name _____

Street Address _____

City _____ State _____ Zip _____

Contact Person _____ Title _____

Telephone _____ E-mail _____

IRS Federal ID # _____ Organization Website _____

II. Organizational Background

Please provide your organization's mission statement.

III. Purpose of Request

Project Title: _____

Please describe the purpose of your request and how it will positively impact the greater Venice, Florida community, including:

a) Description of the problem you are trying to address (e.g. the community's level of need for the project and how that need was determined).

b) Description of the target population and estimated number of people to be served.

c) Description of the specific activities proposed and anticipated results for those who are served.

