



FINDLAY ROTARY CLUB YOUTH COMMITTEE

Funding Request Form

Youth

Agency Name: _____

Agency Address: _____

Agency Phone: _____

Contact Person: _____

1. Agency purpose/mission statement:

2. Description of event/program, including how it will serve the child "at risk".

3. Anticipated number of children served by event/program.

4. Date of event/program.

5. Anticipated overall events/program cost.

6. Anticipated use of funds requested from Rotary.

Signature of agency representative

Date submitted

Submit completed form to: Findlay Rotary Club
Youth Committee
101 W Sandusky St #200
Findlay OH 45840