

# **TNT ACTION SPORTS DISBURSEMENT FUND 2010 APPLICATION FOR FUNDING**

(Please Answer *EACH* Question Completely)

**Organization Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Contact Person & Title:** \_\_\_\_\_

**Contact Telephone Number:** \_\_\_\_\_

1 Amount of funding requested? \_\_\_\_\_

2 Funding purpose? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3 Number of people served through this funding? \_\_\_\_\_

4 Is this a pilot program? \_\_\_\_\_

If not, please explain how it was previously funded: \_\_\_\_\_  
\_\_\_\_\_

5 What funding for this program will come from other sources and in what amounts?

Source: \_\_\_\_\_ Amount: \_\_\_\_\_

Source: \_\_\_\_\_ Amount: \_\_\_\_\_

Source: \_\_\_\_\_ Amount: \_\_\_\_\_

Source: \_\_\_\_\_ Amount: \_\_\_\_\_

6 In the past 5 years, has your organization or agency received funding from TNT Action Sports? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

7 How will your organization contribute to this project? \_\_\_\_\_

8 Circle your Classification: Not-For-Profit \* School \* Governmental Unit \* Church \* Other: \_\_\_\_\_

Tax ID Number: \_\_\_\_\_

9 If the date was available, would organizational reps be willing to volunteer at our events? \_\_\_\_\_

10 If funding is granted, may we use your organization's name for publicity purposes? \_\_\_\_\_

If funding is granted, may we photograph the check presentation for publicity? \_\_\_\_\_

**A copy of your current Classification & Exempt Status must be attached to your application.  
All 2010 funding requests must be postmarked by November 1st, 2010.**