

Brainerd Jaycees

DONATION APPLICATION

INSTRUCTIONS

Please read this document carefully before completing the application. You may reproduce this form on your computer, or type or print legibly the requested information. Please keep your answers as brief as possible. This application is also available at brainerdjaycees.com or icefishing.org. **ALL grant applicants must complete each section, and sign and date the application.**

Application deadlines are January 31 and July 31 with distributions made in March and September of each year.

January 31 deadline >> Ice Fishing Extravaganza Proceeds – send applications to:
Attn: Donations Committee, P.O. 523, Brainerd, MN 56401

July 31 deadline >> Miscellaneous Chapter Fundraising Proceeds – send applications to:
Attn: Donations Committee, P.O. Box 384, Brainerd, MN 56401

SECTION I

ORGANIZATION INFORMATION

Name of Organization				
Address		City	State	Zip
Phone	Fax	Organizational Website	Federal Tax ID Number	
Executive Director		Phone	Fax	Email
Primary Contact (if other than Executive Director)		Phone	Fax	Email
Please provide a brief overview of your organization and its mission:				

SECTION II

DONATION REQUEST INFORMATION

Amount Requested	Area of Focus
\$	<input type="checkbox"/> Education <input type="checkbox"/> Environmental <input type="checkbox"/> Public Service <input type="checkbox"/> Senior <input type="checkbox"/> Youth <input type="checkbox"/> Other
Date of Application	Type of Request <i>(Be sure to fill out Section IV completely)</i>
	<input type="checkbox"/> General Operating <input type="checkbox"/> Program/Project <input type="checkbox"/> Capital Campaign <input type="checkbox"/> Other
Has the organization received a donation from the Brainerd Jaycees in the last three years?	
<input type="checkbox"/> No <input type="checkbox"/> Yes: <input type="checkbox"/> from Ice Fishing Extravaganza – or – <input type="checkbox"/> from Brainerd Jaycees	
Please list any Brainerd Jaycees involved in your organization and their roles.	

CONTINUED

SECTION III

FINANCIAL INFORMATION

Organization's current year budgeted expenses \$	Is this higher or lower than previous year's expenses? <input type="checkbox"/> Higher <input type="checkbox"/> Lower	Higher or lower by what percent?
What are your primary funding sources (list up to three).		
1.		
2.		
3.		
Did you have volunteers at the Brainerd Jaycees activity? <input type="checkbox"/> 0 volunteers <input type="checkbox"/> 1-3 volunteers <input type="checkbox"/> 4-6 volunteers <input type="checkbox"/> 7 or more volunteers		Would you be willing to speak on behalf of the Brainerd Jaycees? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION IV

PROJECT OR CAPITAL CAMPAIGN INFORMATION

What are the timelines for the project and for fundraising?
What is the budget for the program/project or capital campaign? \$
How does this effort address a community need? How does this effort tie to the mission of your organization?
Please explain how you have measured or will measure the success of the program/project?

SECTION V

AUTHORIZATION

The undersigned certifies they are authorized to represent the organization applying for a donation and the information contained in this application is accurate. The undersigned agrees that if a donation is awarded to the organization: (1) the donation will be used for the purpose outlined in the grant award letter and may not be expended for any other purpose without prior written approval from Brainerd Jaycees, (2) Brainerd Jaycees has received nothing of material value in exchange for the donation, (3) information about the organization and the donation may be used by Brainerd Jaycees in any published materials, and (4) certify the organization named above falls under IRS Code Sec. 501(c)(3), and are eligible to receive funds from charitable gaming proceeds..	
Signature of Executive Director or Board Chair X	Date