Confidential
EL PASO COUNTY 4-H FOUNDATION
Request for Foundation Funds

NAME_____CLUB_____

ADDRESS_____PHONE_____

YEARS IN 4-H as MEMBER/LEADER_____DATE_____

TOTAL COST OF FUNCTION:_____ AMOUNT REQUESTED_____

BRIEFLY EXPLAIN THE REASON FOR REQUESTING FUNDS (include the 4-H activity involved; funds to be used only for 4-H activity/event):

EXPLAIN HOW YOU WILL BE ABLE TO "REPAY" THE FUNDS (example: in kind, presentations to other clubs/community groups, newsletter/newspaper articles, assisting with county 4-H activities, assisting with Foundation fundraisers, etc.):

COMMENTS FROM CLUB ORGANIZATIONAL LEADER (if applicant is 4-H member or project leader; please attach on separate sheet).

I agree to fulfill the terms outlined above. If I fail to do so, I agree to consider the funds a loan and repay the Foundation in full within 6 months.

_____ _____ _____
Applicant's Signature **Date** **Parent/Guardian Signature**

The above request is granted in the amount of $_____dependent upon the "repayment" of funds within six months of participation.

_____As presented by applicant OR _____As amended below

Amendments by Foundation, if any:

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The above request is regretfully denied because:

_____ _____
Foundation President Signature **Date**

Please return application form to: El Paso County 4-H Foundation, c/o Mary Gieseker, Treasurer, 1524 Zaiger Place, Colorado Springs, CO 80915, a minimum of thirty (30) days prior to attending the event.

Payment for approved requests will be made following the specific function or activity. El Paso County 4-H Foundation reserves the right to consider applications on an individual basis in emergency situations.