#### The Blennerhassett Family FoundationBlennerhassett-tree.gif

 G R A N T A P P L I C A T I O N F O R M

Date:\_\_\_\_\_\_\_\_\_\_\_

Name of Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Postal Code\_\_\_\_\_\_\_\_\_\_

Charitable Registration Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Fax Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Website: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

###### **Grant Request**

Amount Requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fiscal Year end: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date funds are required:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Brief Project Summary (include project timeline):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please include the following additional information in your application package:

* Full description of proposed projects, including detailed budget and time lines
* A list of your board of directors
* A copy of your most recent annual report
* A copy of your most recent audited financial statement
* A copy of your current budget

Please mail completed application package to:

**The Blennerhassett Family Foundation, 244 Kingsway, Winnipeg, MB R3M 0H3**

**Phone:** 204-896-7395  **Email:** blennerhassettfamilyfoundation@shaw.ca

**Website:** www.blennerhassettfamilyfoundation.ca