

Bethany Lutheran Church of LaPorte Foundation, Inc.

2009 Application for Funds Request Form

1. Name of Applicant:\_\_\_\_\_ Date:\_\_\_\_\_
2. Address:\_\_\_\_\_
3. Name of Contact person:\_\_\_\_\_
4. Address:\_\_\_\_\_
5. **Telephone #** \_\_\_\_\_ **Federal ID #** \_\_\_\_\_
6. Tax Exempt Status (Y) or (N)      Amount of Funds Requested \_\_\_\_\_
7. Reason or Program for Funds Requested \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
9. When are funds needed \_\_\_\_\_ Check payable to: \_\_\_\_\_
10. Are you related to any member of the board of directors of the Bethany Lutheran Church of LaPorte Foundation, Inc. (Y) or (N)
11. Please attach a *detailed* description of how the funds would be used and how this project / cause would be consistent with the religious, educational and charitable purposes of Bethany Lutheran Church.
12. I understand that if funds are granted, a report on how the funds ultimately were used may be requested by the Foundation board members.
13. No requests for college or university education are considered by the foundation unless education is related to church or seminary vocations.

Foundation Boards members meet quarterly and are tentatively schedule for the following dates for 2009. April 6<sup>th</sup>, July 20<sup>th</sup>, Oct 19<sup>th</sup> and Jan 11, 2010. **All applications must be postmarked 14 days prior to the next meeting for it to be considered at that meeting.** Mail all applications to the following address: Be sure to include a phone# and email address if applicable for follow up calls on the application.

Bethany Lutheran Church Foundation  
Attn: Mike Garwood  
102 G Street  
LaPorte, IN 46350