*The Westport Woman’s Club, Inc.*

44 Imperial Avenue, Westport, CT 06880

Phone: (203) 227-4240 Fax: (203) 227-0367

Email: wwc@WestportWomansClub.org

Website: [www.WestportWomansClub.org](http://www.WestportWomansClub.org)

WESTPORT WOMAN’S CLUB 2020-2021 GRANT APPLICATION

In order for your grant application to be considered, a copy of your 501(C) 3 certificate and your agency's current annual report must accompany this application. Organizations receiving a grant are expected to list the Westport Woman's Club as a sponsor or donor. Grants are evaluated year by year, case by case. Past recipients of Westport Woman’s Club grants should not assume that future grants are guaranteed. October 30, 2020 is the deadline for grant applications. We do not accept see attached answers or emailed forms due to the number of applicants. This application must be typed. Please mail your application to us with your backup information. We will send our decision letters in the mail by April 30, 2021.

**NAME OF ORGANIZATION:** Click or tap here to enter text.

**ADDRESS:** Click or tap here to enter text.

**CITY:** Click or tap here to enter text.

**STATE:** Click or tap here to enter text.

**ZIP CODE:** Click or tap here to enter text.

**CONTACT PERSON:** Click or tap here to enter text.

**TITLE:** Click or tap here to enter text.

**PHONE:** Click or tap here to enter text.

**FAX:** Click or tap here to enter text.

**EMAIL:** Click or tap here to enter text.

**WEBSITE:** Click or tap here to enter text.

**MISSION OF ORGANIZATION/AGENCY:** Click or tap here to enter text.

**SOURCES OF INCOME:** Click or tap here to enter text.

**Please check the documents that have been enclosed:**

**COPY OF 501 (c) 3 CERTIFICATE**

**COPY OF ANNUAL REPORT**

**COPY OF RECENT NEWSLETTER**

**COPY OF MOST RECENT IRS FORM 990**

**There will be two forms of Grants, please check which you are applying for:**

**GRANT REQUEST $***Dollar amount being requested*

**USE OF BEDFORD HALL FOR:** *Event type with requested date and time\**

*\*Monday-Thursday, subject to availability*

**DESCRIBE THE FOLLOWING IN DETAIL:**

1. **THE PURPOSE FOR WHICH THE GRANT WILL BE USED**

Click or tap here to enter text.

1. **WHO WILL BENEFIT:**

Click or tap here to enter text.

**WHAT IS THE TOTAL BUDGET OF THE PROGRAM:** Click or tap here to enter text.

PLEASE ATTACH ANY ADDITIONAL INFORMATION WHICH WOULD BE HELPFUL IN DESCRIBING YOUR ORGANIZATION/AGENCY AND ITS PROGRAM(S)

***Please mail your completed application to:***

***The Westport Woman’s Club***

***44 Imperial Avenue***

***Westport, CT 06880***

**SUBMITTED BY:** Click or tap here to enter text.

**NAME:**Click or tap here to enter text.

**TITLE:** Click or tap here to enter text.

**PHONE:** Click or tap here to enter text.

**EMAIL:** Click or tap here to enter text.

**DATE SUBMITTED:**

***October, 30, 2020 is the deadline for grant applications***

***Rev 8/20***