

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

WESTPORT WOMAN'S CLUB 2019-2020 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 31, 2019 is the deadline for grant applications.

NAME OF ORGANIZATION/AGENCY _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

CONTACT PERSON _____

TITLE _____

PHONE _____ FAX _____

EMAIL _____ WEBSITE _____

MISSION OF ORGANIZATION/AGENCY _____

SOURCES OF INCOME _____

COPY OF 501 (c) 3 CERTIFICATE ENCLOSED _____ YES
 COPY OF ANNUAL REPORT ENCLOSED _____ YES
 COPY OF RECENT NEWSLETTER ENCLOSED _____ YES
 COPY OF MOST RECENT IRS FORM 990 ENCLOSED _____ YES

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

_____ AMOUNT OF GRANT REQUEST \$ _____

_____ USE OF BEDFORD HALL FOR: _____

* DATE and TIME: _____

*Monday-Thursday, subject to availability

DESCRIBE IN DETAIL a) THE PURPOSE FOR WHICH THE GRANT WILL BE USED and b) WHO WILL BENEFIT. BE VERY SPECIFIC; USE A SEPARATE SHEET IF NECESSARY.

WHAT IS THE TOTAL BUDGET OF THE PROGRAM?

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
Attn: Community Service Grants
44 Imperial Avenue
Westport, CT 06880**

SUBMITTED BY: _____
(NAME)

(TITLE)
PHONE _____ EMAIL _____

DATE SUBMITTED _____

OCTOBER 31, 2019 IS THE DEADLINE FOR GRANT APPLICATIONS

Rev 8/19