



KID CENTRIC SPORTS ASSOCIATION

Grant Application Form For Groups

Please complete and email to: kcsaboard@gmail.com Or Mail To: 6848 N. Government Way, Ste. 114 PMB #46, Dalton Gardens, ID 83815

Organizational Information:

Organization's name: _____

Organization mailing address: _____

Organization phone and fax number: _____

Primary contact and title within organization: _____

Primary contact email: _____

Primary contact phone number: _____

Organization's mission statement or purpose: _____

Overview of organization, history and objectives: _____

Has the organization received a 501 (c) (3) determination letter by the IRS? _____

If so, please provide a copy (Attachment A). If no, please explain the organization's public charitable and/or community purpose. _____

You may be asked to submit your state/federal tax return from your latest filing if requested (Attachment B), and the organization's operating budget for most current year if requested (Attachment C).

Please list your funding sources and the number of years you have received that support listed.

Signature: _____ Date: _____

Project Information:

Using additional paper if needed, please address the following:

- 1. Category of grant as described in Guidelines and Instructions.
- 2. Detailed project or individual description.
- 3. Total itemized budget for project.
- 4. Amount requested from KCSA.
- 5. Names of governing board or coaches/leaders.
- 6. Describe any committed matching funds for this project or need.
- 7. Manner in which KCSA's contribution would be recognized.
- 8. After this funding ends, how will the project or program be sustained.

Attach supporting documentation if requested.