**PO BOX 2243**

**Grand Junction, CO 81502**

**970-778-3088**

**info@avalontheatrefoundation.org**

**Community Benefit Fund**

**Grant Application**

**Applicant Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Organization Name: | | | Website: |
| Mailing Address: | | | |
| Contact person name: | Phone: | | Email: |
| Alt contact: | Phone: | | Email: |
| Choose one: □501(c)3 □501(c)3 pending □For-profit □Gov’t | | Annual budget total: $ | |
| Brief description of your organization’s mission and programs: | | | |
| Number of members/season ticket holders: | | Number of volunteers: | |
| Number of full-time employees: | | Number of part-time employees: | |

**Event Information**

|  |  |
| --- | --- |
| Brief description of event: | |
| Amount requested: $ | Tentative date of event: |
| Briefly describe why your organization needs this funding: | |
| Primary event category (one or two): □Visual □Performing □Literary □Festival □Cultural/History  □School/educational □Other (describe): | |
| Is this event a collaboration with other organization/s? □Yes □No | |
| Estimated size of audience/attendance/number of people served: | |
| Ticket price: $ | |

We will contact you if we need further information.