



## GRANT APPLICATION

1. A. Name of Organization: \_\_\_\_\_  
B. Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_  
C. Address: \_\_\_\_\_  
D. City, State, Zip: \_\_\_\_\_  
E. Email Address: \_\_\_\_\_  
F. Number of paid employees: \_\_\_\_\_ Full Time: \_\_\_\_\_ Part Time  
G. List of Trustees and Officers (Copy of Letterhead Satisfactory)  
H. If you are a charitable organization, proof of tax exempt status must be attached.

2. Grant Request Amount: \$ \_\_\_\_\_

(Please note that the 30A 10K does not award grants based on a dollar amount, but rather a percentage of our net profits. We ask you or your organization to request a dollar figure as a basis for understanding how much you need. If you are awarded a grant, we will try to meet your requested amount; however, we cannot guarantee it.)

3. In what ways can you or your organization support the race?

4. Will you or your organization provide volunteers for the race events? \_\_\_\_\_

How many volunteers? \_\_\_\_\_ To work in what area? \_\_\_\_\_

Name of Volunteer Team Captain: \_\_\_\_\_ Phone: \_\_\_\_\_

NOTE: a list of actual volunteers and hours worked must be provided to our office by the deadlines above for your grant application to be considered.

5. Briefly describe the purpose of the current grant request.

If you are an individual, please tell us about yourself and your situation.

If you are an organization, please tell us about your company and how you plan to spend the grant. Please include information on your organization's history, its structure and needs. How will this grant help to address those needs. Please feel free to attach pages to this document.

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6. Do you have any other sources of income at this time? Have you or are you receiving any other grants or working in partnership with any other funding organizations? Please explain:

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7. Where is the primary location at which the money will be used?

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You and/or your organization hereby agrees that funds, if granted, will be used only for the purpose described above unless written approval from the 30A 10K Executive Board is received. A full accounting of the use of the grant funds will be provided if requested by the 30A 10K Executive Board. Please note that if the funds are unused in a manner not described above or there is any evidence of illegal use of funds, grant monies will be withheld and your organization is ineligible for future grants from the 30A 10K.

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(Name)

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(Date)

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(Title)

# Post Event Volunteer Report

Grant Group: \_\_\_\_\_

Please list job performed, # of volunteers and hours worked, if multiple days or jobs, please list accordingly. We realize some groups are small in number but work many different jobs.

Volunteer Job(s): \_\_\_\_\_

Number of Volunteers: \_\_\_\_\_

Total Hours: \_\_\_\_\_

Volunteer Job(s): \_\_\_\_\_

Number of Volunteers: \_\_\_\_\_

Total Hours: \_\_\_\_\_

Any absolute fantastic volunteer in your group (besides you!) who deserves special recognition? Please provide name/address.

Will your group work next year?