2017 Twin Cities Polish Festival Grant
DEADLINE: December 31, 2016

Name of Individual or Organization requesting grant:

Address_____

City:_____ State:_____ZIP_____

If Organization, provide contact person: _____

Telephone:_____Cell:_____

Email: _____Website:_____

Please describe the purpose these funds would be used for:

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(attach any other supporting documentation you feel may be relevant to your request.)

Amount requested: _____ ($1000.00 maximum)

If you or your organization is the recipient of any funds, you will be requested to provide receipts and documentation to the Twin Cities Polish Festival of how the funds were applied or utilized.