BAPTIST MISSIONS FOUNDATION OF NEVADA, INC PO Box 33593

Las Vegas, NV 89133

www.bmf-nev.com

APPLICATION FOR FOUNDATION GRANT

Please fill out the form below and email the completed form to bmfnevada@yahoo.com

| 1. Please indicate which grant you are apply applying for multiple grants, please fill out | = | |
|--|----------------|-------------|
| 2. Name of church: | | |
| 3. Church address: | | |
| 4. Name of person of contact and position: (Youth pastor, VBS coordinator, Missions director, Sunday school director, etc) | | |
| 5. Dates of event: | | |
| 6. Please provide a detailed explanation of how the grant will be used: - VBS theme, expected attendance, location of event, etc | | |
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| | | |
| 7. Expected Budget: | | |
| 8. Amount of Grant Requested: | | |
| PRINT NAME: | SIGNATURE: | DATE: |
| For Foundation use only | | |
| Amount of grant awarded: | Date approved: | Funds sent: |