

# Tangier Classic Inc.

*“The fishing tournament that’s making a difference year after year!”*

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Hebron, MD 21830  
www.tangierclassic.com  
tangierclassic@gmail.com

## **Beneficiary Questionnaire:**

Since our inaugural year in 2019 the Tangier Classic fishing tournament has brought our local community partners, sponsors and anglers together for a great cause. That cause being the impactful fundraising that has directly supported through giving, not only a local youth beneficiary but also other non-profit organizations that serve our area. Our dreams of being able to provide these gifts to the community have been realized in our past two annual events and continue to grow as we speak.

*Our mission: **The Tangier Classic is dedicated to serving our local community through the provision of direct financial support to disadvantaged youth of the Lower Shore, and in partnering with other local non-profit organizations. Through the planning and hosting of our annual fall fishing tournament, the Tangier Classic bonds the diversity and strength of anglers, business leaders and communities near and far to impact positive change in the lives of our local youth.***

To ensure our mission is realized, we respectfully request that all potential beneficiaries provide us with the following information to get to know those we serve, and determine how best to aid with our support. **All personal information shall be protected and solely for the use of the Tangier Classic Inc., or at the specific request of the Internal Revenue Service or other applicable government agencies.**

### **Section No. 1**

#### **Contact information:**

Potential Recipient Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent(s) / Guardian (s): \_\_\_\_\_

Address: \_\_\_\_\_ Telephone Number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_

Parent(s) / Guardian(s) email address: \_\_\_\_\_



**Section No. 2**

Below, or on a separate page / letter please provide the Tangier Classic Committee with an insight into the specific need(s) of your potential recipient in your own words. Please provide as much information as you are comfortable with sharing, to include but not limited to; medical condition(s) / diagnosis, specific associated mobility, financial and or logistical challenges presented by these conditions / diagnosis, and other related hardships. In addition to the aforementioned insights, please provide the Tangier Classic with the following information to aid in our beneficiary selection process:

**Are you (is your) or your potential beneficiary receiving assistance from any other organization?**

Yes

No

**If yes, please provide brief description:**

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**Annual Household Income:** \_\_\_\_\_

**Number of Household Occupants:** \_\_\_\_\_

**Number of Employed Adult Household Occupants (provide employment status for each):**

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**Does the Family / Potential Recipient Have Medical Insurance?**

Yes

No

**Average Monthly Cost of any uninsured Medical Bills of Potential Recipient:** \_\_\_\_\_

**Other costs (not medical) associated with insight provided in Section No. 2:** \_\_\_\_\_

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**Section No. 2 insight answers:**

**Please describe your potential beneficiary hardship for consideration:**

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**Specific Medical condition(s):**

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**Associated Mobility and or Logistical issues / challenges:**

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**Other Hardships (not mentioned above):**

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The Tangier Classic sincerely appreciates your providing us with this information and wishes you and your family well. Once reviewed, the Tangier Classic committee may contact you for additional information.