BMCF Philanthropic Donation Application

Please fill out the form and return by emailing the word document back to philanthropic@bataviamothersclub.org or mail the printed form to Batavia Mothers' Club Foundation; P.O. Box 91; Batavia, IL 60510; Attn: Philanthropic Application. Submission deadline is March 15th of the current year. Thank You!

Da	Date Amount Reques	sted
Na	Name of Organization	
Ad	AddressCity	Zip
Со	Contact Person	Phone Number
En	Email	
(Th	This address will be used in our yearly reminders so please include	e one that will most likely be active in the future.)
Ple	Please answer the following questions about your organizat	tion. If you need to use additional pages, please do so.
1.	1. What is your mission statement?	
2.	 Describe the people you serve in terms of age and the nu preschoolers, 5-10 year olds, teenagers, single moms, far 	
3.	3. What geographical area is served by your organization (e.g., Tri-Cities, Fox Valley, state-wide, nationwide, etc)?
4.	4. From where do you primarily receive funding? What per	rcent of your funding comes from the state or federal government?
5.	5. Describe your current financial needs (please be specific	c).
6.	6. If you receive a financial donation from BMCF, how wi	Il it be used? Can you still use it for the same purpose if you do no

receive the entire amount requested?