

American Horse Trials Foundation, Inc.

EVENT GRANT APPLICATION

1. Event Name: _____
Address: _____
Organizer's Name: _____
Corporate I.D. No. _____

2. Telephone: Home _____ Fax _____
Event _____ Cell _____
Email _____

3. For the Period 1/1/19 through 12/31/19.

4. Event Activities:

If you anticipate activities that are beyond routine administration of an event, please describe those activities (*e.g.* course design and construction).

5. A budget for the proposed grant period is:

Course Design: _____

Building Materials : _____

Fundraising : _____

Administrative : _____

Prizes : _____

Other: _____

Total: \$ _____

6. The following is a summary of funds available to the event from sources other than the AHTF (e.g. event income, corporate sponsorship) for the event expenses during the grant period:

7. Explain the benefit the event would receive towards its competitive goal from the requested grant:

8. Use the back of this form or attach additional sheets to provide any additional information you may have with the grants committee to consider.

By signing this application, the applicant certifies that he/she is an organizer of a *bona fide* USEF sanctioned event. The organizer further certifies that any funds that are received from the AHTF will be used exclusively to reimburse the Event for expenses associated with administration, design or construction of a USEF sanctioned event.

Signature

Title

Grant Applications are reviewed and acted upon weekly. Applicants will be informed of the action taken on their request.

Grant requests will not be returned to the applicant. Once a grant request has been acted on by the Trustees, such action is final upon the application as presented. The request will not be carried over for consideration at the next meeting. The applicant is not, however, precluded from making other new grant requests in the future.