



PO Box 823
Manassas Park VA 20111
P 800-345-2530 | F 800-345-2521
www.windriverchimes.com

Wind River Fund Grant Application

Thank you for your interest in funds from the Wind River Fund. Please provide the following information about your request.

Date of Application: _____

Organizational Information

Legal Name of Organization: _____

IRS 501(c)3 number: _____

All recipients of funds from the Wind River Fund must have a current 501(c)3 designation by the IRS.

Is your organization listed on Guidestar.org? Yes _____ No _____

Has Wind River previously contributed to your organization? Yes _____ No _____

What percentage of your board of directors contribute financially to your organization? _____ %

Year Founded: _____ Current Annual Operating Budget: \$ _____

Executive Director: _____ Email: _____

Contact Person/Title (if different from Executive Director): _____

Address: _____

City: _____ State: _____ Zip: _____

Mailing Address, if different from above: _____

Phone: _____ Fax: _____

Website: _____

Project Information

Project Name: _____

Amount Requested: \$ _____ Total Project Cost: \$ _____

Please list other financial sources contributing to this project: _____

Brief description of the project and its goals: _____



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How does the project increase the quality of living for those you serve? _____

How does your project & organization inspire harmony? _____

Geographic Area Served: _____

Submission

How did you learn about the Wind River Fund? (Check all that apply)

- Online Search
- Social Media
- Referral from _____
- Other: _____

Please submit your completed application to donations@windriverchimes.com. Upon review of your application, additional information may be requested. We evaluate applications and award grants on a quarterly basis and will group applications by the date received as follows:

<u>Applications received by:</u>	<u>Awards determined by:</u>
March 15	April 30
June 15	July 31
September 15	October 31
December 15	January 31

Signature of person submitting the application: _____

Name(printed): _____ Date: _____

Title: _____