



Joining Hands with Our Community
RE/MAX Lake of the Ozarks Charitable Foundation
Grant Application

Name of proposed Organization or Recipient: _____

Address: _____

Contact Person: _____ Phone: _____

Describe the situation that would qualify the Organization or Individual for a grant from RE/MAX Lake of the Ozarks Charitable Foundation:

What type and how much support is needed?

Is support available from other organizations within our community?

Is this a one-time need, or is the situation on going?

Any additional information that the Directors of the RE/MAX Lake of the Ozarks Charitable Foundation should consider:

Applicants Signature

Date