



**PENNSYLVANIA NATIONAL HORSE SHOW FOUNDATION
GRANT APPLICATION**

Name of Applicant: _____

Contact name and title: _____

Physical Address: _____

Mailing address: _____

Website: _____

Email _____ Phone: _____

1. Please provide a description of your organization including a brief history, purpose and mission statement:

2. Please provide a brief outline for your grant request.

3. What is the amount of funding you are requesting from the PNHS Foundation?

What is the annual budget of your organization?

What is the main source of funding for your organization?

4. Please answer the following:

Does your organization have Officers and Directors? If yes, please attach a current list

Is your organization a non-profit?

If your organization PATH certified? If yes, PATH Certified # _____

5. What are the annual operating dates of your organization?

6. Miscellaneous, please provide the following details:

Number of horses in your program:

Number of people/clients served each week:

Number of classes held each week:

Number of paid employees:

Number of volunteers:

Area Served: State _____ County _____

7. Additional information (optional)

Please complete and return this application by August 31, 2019 to:

PA National Horse Show Foundation
720 Limekiln Road
New Cumberland, PA 17070
Attn: Susie Webb
Email susie@panational.org