



**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 are the current main sources 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 yes, please include a copy of your IRS Determination Letter

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

Please list any other certifications or accreditations:

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 29, 2025 to:

Email: susie@panational.org

PA National Horse Show Foundation
P.O. Box 6815
Harrisburg, PA 17112
Attn: Susie Shirk