



Request for Support from The Kiwanis Club of Sammamish

Organization: _____

Address: _____

Project Contact: _____

Phone: _____ FAX: _____ E-mail: _____

Statement of Need (conditions that motivate proposed project): _____

Plan to address this need (extent of cooperation with Kiwanis, co-sponsored youth groups, and other community organizations; method of financing and promotion): _____

Requested Support (and relationship to Kiwanis' role): _____

Project Time Line: _____ Response Deadline: _____

Kiwanis Club of Sammamish has reviewed this proposal and has agreed to support the project under the following conditions: _____

Kiwanis Club of Sammamish reserves the right to recognize their contribution to this project, including use of the supported organization's name and the supported event, in promotional material and advertising of club sponsored activities.