Bourne Community Engagement Committee

Pre-Application Summary Form

APPLICATION SUMMARY	
Name of Event/Project	
Date of Event (Date must be firm. Funding will be subject to scheduled date)	
Location of Event	
Amount Requested	
Total Event Budget	
Is this a first time event?	
Have you received Town Funds before?	

Please provide contact information for the person with primary responsibility for the event.

APPLICANT INFORMATION	
Applicant's full legal name	
Primary Contact Name (person who will manage project and is authorized to execute contracts)	
Secondary Contact Name (authorized to act in the place of the Primary Contact)	
Mailing Address	
Telephone	
Email	
Website	
Federal Tax ID or 501 C3 number	
For Profit or Not for Profit?	
Applicant Signature*	

* Please attach a 1-page narrative of the proposed project, event, program, etc.