

COMMUNITY GRANT APPLICATION

Submission deadline: October 14, 2017

The Bainbridge Island Parks Foundation (BIPF) presents the Community Grant program to encourage and support individuals and community groups who want to undertake projects that will improve and enhance trails, parks and open spaces for users. BIPF is a nonprofit tax-exempt organization funded by private donors, grant sources and contributions to the 'One Call For All' campaign. Our mission is to enhance community by supporting a thriving system of parks, trails and open space. BIPF Community Grants aim to help support citizen-inspired projects by providing funding support for the capital costs of projects that improve our parks, trails and recreational opportunities.

GENERAL INFORMATION:

1. Name of individual or organization: [Click to enter text](#)
2. Primary contact for this grant request and position in organization: [Click to enter text](#)
3. Contact telephone and email address: [Click to enter text](#)
4. Organization's mailing address: [Click to enter text](#)
5. Organization's EIN#: [Click to enter text](#)
6. Mission statements or goals of the organization: [Click to enter text](#)
7. At this time how many people does the organization serve: [Click to enter text](#)
8. Names of organizations officers/leaders/lead volunteers: [Click to enter text](#)
9. Please describe your organization and an overview of previous accomplishments, if applicable. If yours is a new organization, please describe the relevant experience of your group or membership: [Click to enter text](#)

PROJECT INFORMATION:

1. Name of project: [Click to enter text](#)
2. Estimated cost of project: [Click to enter text](#)
3. Grant request \$ [Click to enter text](#)
4. Please **ATTACH A PROJECT BUDGET** that includes total cost of project, grant request amount for capital expenses, your group's monetary contributions, other grants, in-kind value that may include donated materials and/or donated services and volunteer time. Please note that BIPF grants are only for capital costs.
5. Please describe the project, including where it will take place and how it would fulfill BIPF's mission statement: [Click to enter text](#)
6. How will the project benefit the community? [Click to enter text](#)

7. How was the “need” for this project identified? [Click to enter text](#)
8. How many people will be served by this project? [Click to enter text](#)
9. What is your expected timeline? [Click to enter text](#)
10. Are there any other organizations currently providing a similar service and if so, how is your project different? [Click to enter text](#)
11. Does this project require approval or coordination with the Bainbridge Island Metropolitan Park & Recreation District, City of Bainbridge Island, Bainbridge Island School District or any other property owner or non-profit group? If so, please attach documents indicating that this project has been approved by the appropriate agency.
 - No
 - Yes Name of Organization: [Click to enter text](#)
12. Who do you anticipate will be responsible for maintenance after the project is completed:
 - Bainbridge Island Metropolitan Park & Recreation District
 - Your volunteer group
 - Other: [Click to enter text](#)
13. Describe the maintenance plan for this project: [Click to enter text](#)
14. If you have received funding from BIPF in the past, please describe the project, year and amount granted: [Click to enter text](#)

APPLICATION CERTIFICATION:

Application prepared by (name and title): [Click to enter text](#)

Date: [Click to enter text](#)

Signature: [Insert signature image or complete by hand](#)

Co Applicant, if required (name and title): [Click to enter text](#)

Date: [Click to enter text](#)

Signature: [Insert signature image or complete by hand](#)

The signature of a Co-Applicant is required if the applicant is not a Non-profit.

Return Completed Application To:

Bainbridge Island Parks Foundation • PO Box 11127 • Bainbridge Island, WA 98110

Or email to barb@biparksfoundation.org