



THE MUSHROOM FESTIVAL

2012 GRANT APPLICATION GUIDELINES

Grant Applications are due by Wednesday, February 15, 2012, 5 p.m.

The Mushroom Festival Grant Application Packet should be submitted:

By Mail:

**The Mushroom Festival, Inc.
P.O. Box 1000
Kennett Square, PA 19348**

Dropped off:

**The Mushroom Cap/The Growing Tree
114 West State Street
Kennett Square, PA 19348**

The Grant Application Packet should include one copy of:

- Mushroom Festival Grant Application
- Most recent 501(c)(3) ruling for your organization.
- Board of Directors list for your organization.
- A list of funders you will solicit for this program or item.
- A brief description of your organization and its purpose.
- Attach the most recently completed Form 990, 990-Z or explain why one was not filed.

1. Please be specific when describing your need. Funds requested for a general budget will not be considered.
2. Do not send additional information.
3. Grants will be announced by **March 15, 2012**
4. All grant recipients are expected to:
 - Send a representative to the Spring Gala (date to be announced, tentative April 20) for the award presentation.
 - Participate in the Mushroom Festival Parade (Friday evening, Sept. 7)
 - Return the required documentation form and receipts by December 31, 2012.
5. Organizations that do not meet the above requirements will not be eligible for grants in 2013.
6. Organizations receiving a Mushroom Festival Grant will be given the opportunity to have a booth (one of the days) on the street during the Mushroom Festival.
7. **NEW FOR 2012:** Grant recipients are encouraged to participate in our **Button-Up-A-Booth Volunteer Program**. We're asking organizations to man one of our booth locations for a 1/2-day shift. While working the shift you may display information about your organization at your booth.

If you have any questions you are encouraged to contact Kathi Lafferty, Festival Coordinator, by e-mail at klaff19757@aol.com or by telephone at 610-925-3373.

Remember the deadline is February 15, 2012 at 5 p.m.



Date _____

THE MUSHROOM FESTIVAL

2012 GRANT APPLICATION

Organization Name _____
Executive Director _____

Mailing Address _____
City/State/Zip _____
Office Phone _____ Fax _____ E-mail _____
Date organization was founded _____ Annual organization budget \$ _____

Specific Program or Item which grant will be used for:

Amount requested \$ _____ **Total annual program budget \$** _____

Contact Information

Please provide names and email addresses and phone numbers for those individuals within your organization who will work directly with the Mushroom Festival in fulfilling the grant's requirements. This person(s) will receive regular updates and requests for information about the Spring Gala, Community Parade, Booths, and reminders of submitting the grant documentation.

Contact #1: _____ (email) _____ (phone) _____
Contact #2: _____ (email) _____ (phone) _____

Below, on back, or separate sheet of paper, describe the specific reason, item or purpose you wish us to fund with this grant, including specific program goals and how a grant would meet them.

THE MUSHROOM FESTIVAL

BUDGET FORM

Budget Information (fill in form below or attach organization's budget)

Organization Name _____

FY Dates _____

Program Name _____

	Organization (last fiscal year's actual income/ expenditures)	Organization Budget (Current fiscal year)	Proposed Program Budget
Income			
Fund Request	_____	_____	_____
Individual Contributions	_____	_____	_____
Foundation Grants	_____	_____	_____
Government Contracts	_____	_____	_____
Membership Dues	_____	_____	_____
Special Events	_____	_____	_____
In-Kind	_____	_____	_____
Other _____	_____	_____	_____
Total Income	_____	_____	_____
Expenses			
Salaries	_____	_____	_____
Benefits & Taxes	_____	_____	_____
Professional Fees	_____	_____	_____
Occupancy (rent, Utilities)	_____	_____	_____
Insurance	_____	_____	_____
Telephone	_____	_____	_____
Postage/Shipping	_____	_____	_____
Copying/Printing	_____	_____	_____
Supplies	_____	_____	_____
*Equipment (specify)	_____	_____	_____
Meeting Expenses	_____	_____	_____
Travel/Transportation	_____	_____	_____
Accounting & Legal	_____	_____	_____
Fundraising	_____	_____	_____
Promotion/Publicity	_____	_____	_____
Other	_____	_____	_____
Total Expenses	_____	_____	_____
Balance	=====	=====	=====

Please list below or on the back other prospective funders for the program/item and the amounts to be requested.