GRANT / SPONSORSHIP / DONATION REQUEST APPLICATION FORM Website: www.winusvilottery.com



ST. THOMAS

81CC & 81D Kronprindsens Gade (Former Scotia Bank Waterfront Location) St. Thomas, VI 00802-6916 (340) 774-2502

ST. CROIX

Sunny Isles Shopping Center Suite 6,7, & 8A St. Croix, VI 00821 (340) 778-6360

L. DATE OF SUBMISSION:	INTERNAL USE ONLY
L. DATE OF SOCIONISSION.	
2. NAME OF ORGANIZATION:	DATE REVIEWED
3. CONTACT PERSON:	AMOUNT REQUESTED
1. MAILING ADDRESS:	
5. PHYSICAL ADDRESS:	EXEC. DIRECTOR'S SIGNATURE
5. CITY / STATE / ZIP CODE:	10. APPLICANT STATUS:
7. PHONE NUMBER:	☐ NON-PROFIT ☐ CLUB/ASSOCIATION
3. FAX NUMBER:	☐ PRIVATE AGENCY ☐ OTHER
9. E-MAIL:	11. HAVE YOU OR YOUR ORGANIZATION RECEIVED FUNDING FROM VIL BEFORE?
L2. TYPE OF FUNDING REQUEST	AMOUNT REQUESTED RECEIVED
☐ ART ☐ ASSOCIATION/CLUB ☐ OTHER	MONTH AND YEAR WHEN FUNDING WAS RECEIVED
13. TITLE OF EVENT:	
14. LOCATION:	15. DATE OF EVENT:
6. PROVIDE A BRIEF DESCRIPTION OF THE PROGRAM/ACTIVITY, THI BENEFIT FROM THIS INITIATIVE?	E AMOUNT BEING REQUESTED AND HOW WILL VI LOTTERY

GRANT / SPONSORSHIP / DONATION

REQUEST APPLICATION FORM Website: www.winusvilottery.com



ST. THOMAS

5800 Kronprindsens Gade St. Thomas, VI 00802-6916 (340) 774-2502 Fax: (340) 776-4730

ST. CROIX

Sion Farm Shopping Center St. Croix, VI 00821 (340) 778-6360 Fax: (340) 778-0683

17. SELECT CATERGORY(S) FUNDING WILL BE USED FOR:

O EDUCATIONAL:

- O WORKSHOPS / LECTURES
- O TRAVEL: OFF ISLAND
- O TOURNAMENTS
- O QUIZ BOWL
- O PROGRAMS: SCIENCE / MATH
- O OTHER (DETAIL IN ITEM 16.)

O SPORTS

- O BASEBALL/SOFTBALL LEAGUES
- O BASKETBALL
- O FOOTBALL
- O TRACK AND FIELD
- O CRICKET
- O MARTIAL ARTS
- O HEALTH AND FITNESS
- O SOCCER
- O TENNIS
- O SWIMMING
- O HORSE RACING
- O OTHER (DETAIL IN ITEM 16.)

\circ arts

- O EXHIBIT
- O PERFORMING ARTS
- O CRAFTS: WOODWORK, STONE
- O AUDIO: PRODUCTION / RECORDING / **DISTRIBUTION**
- O VIDEO: PRODUCTION
- O LITERACY: POETRY / READING PROGRAMS
- O PUBLIC ADS: BOOKLETS, ETC.

O COMMUNITY

- O CULTURAL / HISTORICAL EVENT
- O CARNIVAL / FESTIVAL
- O AGRICULTURAL FAIR
- O SENIOR CITIZEN EVENT
- O YOUTH ENRICHMENT EVENT

18. ITEMIZED BUDGET SUMMARY (PLEASE FILL APPROPRIATE ITEMS.) PLEASE NOTE IF FUNDING IS APPROVED, YOU WILL BE REQUIRED TO SUBMIT PROOF THAT MONIES WERE USED FOR THEIR APPROVED PURPOSE.

	ITEMIZED COST: (LIST PURPOSE)	AMOUNT
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
	TOTAL COST:	

NOTE: Completion of this form does not guarantee cost that VIL will fulfill this request. Please email your completed form, along with a cover letter addressed to the Executive Director on your organization's letterhead to keva.muller@vilottery.vi, attention DONATION REQUEST APPLICATION.

Authorized Representative	Date