

Date: _____

Outreach Grant Application
St. Mary's Church
3055 Main Street, Box 395
Barnstable, MA 02630

Name of Organization/Agency _____

Address _____

Mailing Address (if different) _____

Not for profit _____yes _____no 501(c)(3) _____yes _____no 501(c)(3) Number _____

Contact Person _____

Business phone _____ Cellphone _____

Organization/Agency Mission and Focus

Geographical Area to be served with this grant _____

Your Annual Budget _____

Funding Sources

- ☐ Grants _____ %
- ☐ Corporations _____ %
- ☐ Institutions _____ %
- ☐ Individuals _____ %
- ☐ Other _____ %

Specific Needs for Funding / Other information to be considered

Approximate Number served each year _____

Amount Requested (*please fill in the specific amount*):

- ☐ Less than \$500: _____
- ☐ \$500 - \$1000: _____
- ☐ \$1000- \$2500: _____
- ☐ \$2500 - \$5000: _____
- ☐ Other amount: _____

Completed Outreach Grant applications are reviewed 2x/yr. Deadlines for submission are April 1st and October 1st. Applications can be mailed (Outreach Committee, St. Mary's Church, Box 395, Barnstable, MA 02630) or emailed to: outreach@stmarys-church.org.

Date Received _____