

APPLICATION FOR APPROVAL OF EVENT
PERCHERON HORSE ASSOCIATION OF AMERICA EDUCATION & CHARITABLE FUND
MATCHING FUNDS PROGRAM

Application must be in the office on or before October 1st. of the year preceding the event, so that it can be budgeted for the upcoming year, when the Trustees meet for their Annual Meeting.

Event name and brief description _____

Organization sponsoring event _____

Date of event _____ Location of event _____

Contact(s) for event _____ Phone _____

Number you expect to attend _____ Youth (under 18) _____ Adults _____

Please list item and amount of expected expenses below.

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

Total Estimated Expense \$ _____

(Person responsible for event) Signature _____

Complete the application and mail to :

Percheron Education Fund, 34202 SALEM GRANGE RD. SALEM, OH 44460

The person who signs this application will be notified of the Trustees decision, by mail, after the Annual Meeting. As soon as possible after the event, complete the final accounting of expenses, mail to our office. A check for your matching funds will be mailed to the person named on the application to receive payment.

Note- This form may be reproduced or more forms requested from the above address.