MAYSC GRANT APPLICATION

Applicant Information

Name of Organization (if applicable): _____

Name of Person Submitting:_____

Phone: _____

Email: _____

Mailing Address: _____

Checks Payable to:_____

Type of Grant Applied For (check one or more): ☐ Trap Rounds ☐ Facility Use ☐ Combination

Amount Requested (up to $700 total): $ _____

If requesting a combination, indicate allocation:

Trap Rounds: $_____

Facility Use: $_____

Applicant Certification

By signing below, I certify that the information provided in this application is accurate. I understand that grant funds are issued by MAYSC (Minot Area Youth Sportsman's Club), must be used in accordance with club policies and applicable rules, and are subject to approval and availability of funds. Submission of this application does not guarantee funding.

Applicant Signature: _____ Date: _____

Applications may be returned via e-mail: maysc@minotgunclub.com ***or*** by mail: P.O. Box 615 Minot, ND 58701
Applications will be considered at the next MAYSC board meeting following its submission. Meetings are held on the 1st Monday of each month at Minot Gun Club, at 6pm.

OFFICE USE ONLY

Application Status:	☐ Approved ☐ Declined
Approved Use:	☐ Trap Rounds ☐ Facility Use ☐ Combination
Amount Approved:	Trap Rounds: $_____ Facility Use: $_____
Check #:	
Notes:	

Name of MAYSC Board Member Authorized to Sign: _____

Signature:_____ Date:_____