

Yulee Lions Club Donation Request Form

Request Date	
Date for response from the Yulee Lions Club (please allow 30 Business days)	
Requestor's Name	
Requestor's Email	
Requestors Phone	
Requestor's affiliation with the Yulee Lions Club	
Organization's Name	
Organization's • Phone • Address • City • State / Zip Code	-
. What amount of funding is being requested?	
 Yes If yes, when No 	
8. Is your organization a 501c3 non-profit? • Yes • No	
 What type of local service does this organization provide? Youth Educational Health & Well-being of the Community Serving the Underserved Other 	

. Will the Yulee Lions	Club receive public recognition from this organization or project?
• Yes	
• No	
• If yes, in what v	way?
. For what purpose(s)	would the donation be used?
	
Please provide any othe ommittee to make their	r information related to this request you believe would be helpful in allowing our relation.