

Capezio/Ballet Makers Dance Foundation, Inc.
One Campus Road, Totowa, New Jersey 07512 - 973-595-9000, Ext. 6203

Application Cover Form - Request for Support

Dear Applicant: Please complete the following information and use it as a cover sheet for your grant application which must be received in Totowa on or before April 1, 2008. Late applications and applications determined by the Foundation to be incomplete will be rejected. The Foundation is not responsible for applications not received whether sent by U.S. Mail, Federal Express or other postal or delivery services. Thank you.

APPLICANT NAME: _____

CONTACT NAME: _____

TITLE: _____

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ADDRESS:

PHONE: _____

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AMOUNT REQUESTED: _____

FOR (GOS, Special Project, Other): _____

SPECIFIC DANCE NEEDS TO BE MET: _____

PROJECT OR PROGRAM DESCRIPTION AND SERVICES TO BE PROVIDED:

SIGNATURE: _____ **DATE:** _____

Enclosures (Please check off): Tax Exemption Form (); Program/Project Narrative (); Budget (); Board of Directors (); Bios of Key Personnel ();
NO MORE THAN 2 brochures or p.r. pieces ()

