

***Mathew Immel Grant
Application Form – 2019
(Zone 4)***

Name: _____

Fair/Organization: _____

Preferred Mailing Address: _____

City _____ State/Prov _____ Postal _____

Day Phone: _____ Evening Phone: _____

Preferred E-Mail Address: _____

INSTRUCTIONS

1. Always refer to the current year's Mathew Immel Grant rules (separate document).
2. This is a fillable PDF form. When you open it on your computer you can type directly into the form from your computer, but you must do a SAVE AS function – to save it as a different file name and especially file location (i.e. desktop or a separate folder) in order for it to contain the information when sent!
3. On the following pages do NOT reference your fair's name, your name, your location, etc. The grant is to be judged "blind" – the committee does not know the identity of the applicant.
4. Email your completed application to Lori Hart lhart@fairsandexpos.com It must be received by November 4, 2018.

Applicant # _____

For Office Use Only

Date Received: ____/____/____

IAFE Membership Valid?

Current position with fair/organization:

- | | |
|--|--|
| <input type="checkbox"/> CEO/Manager (paid full time) | <input type="checkbox"/> CEO/Manager (paid part-time <u>or</u> volunteer) |
| <input type="checkbox"/> Staff member (paid full time) | <input type="checkbox"/> Staff member (paid part-time <u>or</u> volunteer) |
| <input type="checkbox"/> Board member | <input type="checkbox"/> Other _____ |

How long have you been in your current position with the fair/organization? _____

Annual Fair Attendance: _____

Total Annual Revenues for Organization: \$ _____

Have you previously attended Zone 4? Yes___No___

Please limit your response to the space allotted -- do not make attachments.

How would receiving the Mathew Immel Grant be of benefit to you?

(#End)

Applicant # _____