



GRANT Application

SKATING CENTER AFFILIATION MUST BE LISTED. MUST BE A ROLLER SKATING ASSOCIATION MEMBER. PLEASE FIND YOUR NEAREST RINK AT WWW.ROLLERSKATING.COM/FINDARINK.

Skating Center Name	
Owner/Operator Name	
Skating Center Address	
City/State/Zip	
Phone Number	
Email Address	
Website	

Name of School (Check Payable to)	
School Name	
Address	
City/State/Zip	
Phone Number	
Website	
Email	
Applicant's Name/Title	
Non-profit Certification Number	

SEND TO: Return this form and any supporting documentation by email to grants@rollerskating.com or mail to Roller Skating Foundation, 6905 Corporate Drive, Indianapolis, IN 46278.

If you do not receive confirmation email of receipt, please follow up with grants@rollerskating.com as we may not have received it.

DEADLINES: No deadline. Simply submit your request and the Foundation will determine grant awards as they come in.
QUESTIONS? Call 317-347-2626 Ext. 107

GRANT REQUEST INFORMATION

Project Request Title	
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Grant Usage: Please provide an explanation as to how you intend to use the grant funds and why your school or program should be selected as a recipient. Please be as detailed as possible and attach additional information on project, if available. The following criteria will be used when determining grant recipients: Need, creativity and priority consideration will be given to projects directed towards roller skating, as well as innovative projects aimed at improving physical fitness or education. You may attach a separate document of supporting material if you would like.

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How many students are being represented by this grant?			
Amount Requested	\$		(Please note: Amount requested must be specific for application to be processed.)
Has your school or cause previously received a grant from the Roller Skating Foundation?		Yes	No
If yes, please indicate the department, cause and year.			

SIGNATURE

Signature of Applicant		Date	
Signature of Principal		Date	