

Application for U.U.F.H. "Split-Plate" Collection

Please fill out and return to the B.O.W. Committee mailbox

Date : _____

Names, Phone #s & Email Addresses of 3 Members recommending Split-Plate charity (one initiating member & two supporting members)

1. _____

2. _____

3. _____

Name of Organization:

Goals of the Organization:

Organization's History/Mission Statement (Attach additional pages if needed)

Need for Funding at this time:

