

Tony Randall Theatrical Grant

Date of application: _____

Name of organization to which grant would be paid. Please list exact legal name. _____

Purpose of grant (one sentence) : _____

Address of organization: _____

Telephone number: _____ Fax: _____

E-mail: _____

Executive Director: _____

Contact Person and Title (if not executive director) _____

Is your organization an IRS 501 (c)(3) not-for-profit? (yes or no): _____

If no, please explain: _____

Total organizational budget (for current year): \$ _____

Dates covered by this budget: (mo/day/year): _____

Total project budget: \$ _____

Dates covered by project budget (mo/day/year): _____

Project name (if applicable): _____

Please attach a one page or less word document explaining your project.