



**APPLICATION FOR GRANT
ARVC FOUNDATION DISASTER RELIEF FUND**

Park Name: _____

Name of Park Owner (Applicant): _____
(Please Print)

Park Address (not PO Box): _____

City: _____ State: _____ Zip: _____

NOTE: You may not be reachable at the park address, so please give the address where you can be reached now below.

Current Reachable Address: _____

City: _____ State: _____ Zip: _____

Phone Number (where you can currently be reached): _____

E-mail Address: _____

I am applying for a:

- Grant of up to \$1,000 for Interim Relief - Personal Use
- Grant of up to \$3,000 for Interim Relief - Business Use
- Grant of up to \$1,000 for Providing Shelter, Food, Clothing, etc., for Victims of a Natural Disaster Including Park Staff

Note: You may apply for all three. This application can be submitted only one time per park per emergency.

Amount Requested: \$ _____

Please type your responses to the following on a separate sheet of paper with your name on the top of each page (If you do not have access to a computer and must handwrite, please write clearly.)

1. Provide a statement describing the nature of your emergency and an explanation of how you intend to use the funds from each grant type.
2. Provide photos showing damage for which you are seeking interim assistance to repair.
3. If you plan to or have been providing shelter, food, clothing or other assistance to victims of the disaster, please enumerate your charitable expenses provided to the disaster victims: i.e. the number of sites, number of nights and the nightly fee of sites provided to refugees at no cost; the number of meals provided and the cost per meal, other charitable costs associated with housing the refugees or providing for a park employee(s).
4. If you are requesting funds to provide assistance to a park employee, please provide information about the employee's employment history, the employee's loss, living situation and needs, what support the park ownership is providing and how the park owner proposes to use the funds provided by the ARVC Foundation for the employees benefit.

Please submit your application and all attachments to Barb Youmans at byoumans@arvc.org and/or by mail to: Barb Youmans, ARVC Foundation, 9085 E. Mineral Cir., #200, Centennial, CO 80112.