

Church Activity/Event Financial Assistance Request

The purpose of this form is to inform the leadership of Northeast Christian Church of your request for financial assistance for a specific activity/event. Information will be kept confidential but will be shared with those individuals involved in the decision making process. There is no guarantee assistance will be available. The decision to grant assistance will be based upon available finances, the number of applicants requesting assistance, the applicant's church involvement, and the need of the individual. Please consider your request for assistance thoughtfully. Requests submitted less than three days prior to the activity/event or registration deadline will not be eligible for consideration.

Activity or event requesting financial assistance for:

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Name:						
Best way to contact me:	Text	Phone	Email	_		
Amount of assistance requested:		25%		50%	75%	100%
Brief explanation of need for	r financ	ial assista	nce:			
Brief explanation of why I wa	ant to b	oe a part o	of specified	activity/ever	nt:	

Are you willing to work in exchange for financial assistance? Yes No