

**KENDAL C. AND ANNA HAM CHARITABLE FOUNDATION  
GRANT APPLICATION**

Circle which meeting you are applying for consideration of your request:

APRIL \_\_\_\_\_

OCTOBER \_\_\_\_\_

*The deadline for application to the APRIL meeting is January 31 by 5 pm.  
The deadline for application to the OCTOBER meeting is July 31 by 5 pm.*

Name of Organization \_\_\_\_\_

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Town

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Amount of Request

\_\_\_\_\_  
E Mail

\_\_\_\_\_  
President/Executive Director (Print)

\_\_\_\_\_  
Date

Have funds for this purpose been requested from other sources? Yes \_\_\_ No \_\_\_

If yes, to whom? \_\_\_\_\_

\_\_\_\_\_  
Signature

Has this grant application been approved by your Board?

Yea \_\_\_\_\_ Nay \_\_\_\_\_ Date \_\_\_\_\_

Applications must be postmarked by the deadline.

Please MAIL your applications to:

PO Box 2853, North Conway, NH 03860

**PLEASE SEE LIST OF EXHIBITS FOR THOSE ITEMS THAT MUST BE SENT DIGITALLY AND  
VIA REGULAR MAIL.**