

## **Regional Event Funding Request Form**

**Event organizer to complete the information noted below and submit via email to 356 Registry President**

**Name of Event Organizer:** \_\_\_\_\_

**Contact Information of Event Organizer:**

**Email Address:** \_\_\_\_\_

**Phone #'s:** \_\_\_\_\_

**Location of Event:** \_\_\_\_\_

**Description of Event:** \_\_\_\_\_

**Date(s) of Event:** \_\_\_\_\_

**Anticipated Number of Attendees:** \_\_\_\_\_

**Funding amount Requested:** \_\_\_\_\_

**Date 356 Registry insurance confirmed:** \_\_\_\_\_