

Community Engagement Clusters Regional Service Office

Neighborhood Events Matching Funds Grant Program Application Form

Funding Cycle: July 1, 2024 – June 30, 2025

APPLICANT & EVENT INFORMATION (PRINT OR TYPE):

| What is the name of your neighborhood, block group, or club? | |
|---|----|
| Who is the main person to contact? | |
| What is the email address of the contact person? | |
| What is the mailing address of your neighborhood, block group, or club? | |
| What is the phone number of the contact person? | |
| When did your group start? (month and year) | |
| How much money are you asking for? (You can ask for up to \$1000) | \$ |

APPLICANT & EVENT INFORMATION CONTINUED

| What is the mission or purpose of your | group? Who are the leaders and/or current officers? |
|---|---|
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| | |
| Neighborhood Event Name: | |
| Date: | |
| Location: | |
| Region: Choose the region where your | event will take place.(Find my region). |
| A.) Bethesda/Chevy Chase | D.) Silver Spring |
| B.) East County | E.) UpCounty |
| C.) Mid-County | |
| Is the activity open to the public? | 'es No |
| If no, please explain why. | |
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| | |
| What is your activity or event about? H better? | low will your activity make the neighborhood |
| | |
| | |
| | |
| How many individuals, households or b | ousinesses will take part in or benefit from |
| the activity? Please provide an estimate | |
| , , , | |

Neighborhood Events Matching Funds Grant Program Estimated Expenses Form

| Please give a short summary of how the money will be spent. | | | | |
|---|--|--|--|--|
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| | | | | |
| Please list the things you will spend money on for your activity or event. For example: food, paper products, printing, or other items. | | | | |
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How much do you expect to spend, or how much have you spent? \$_____

Neighborhood Events Matching Funds Grant Program Matching Funds Pledge Form

The match for the NEMF can be made in different ways:

- Volunteer Hours
- Work/effort put in by members.

 Donations of services or materials

Cash Donations

| What items or services are being donated or matched? (for example, tent, equipment, paper) | Who is donating these items or services? Please list their name and address. | How much is the work of volunteers worth? | What is the value of the donated materials or services? | How much money is being donated? | | | |
|--|--|---|---|---|--|--|--|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Total Amount pledged: | | \$ | \$ | \$ | | | |
| Grand Total: | \$ | • | | • | | | |
| ote: The total amount of matching donations must be equal to or greater than the funds provided by Montgomery County. Name of Contact Submitting Application: | | | | | | | |

Signature: _____ Date: _____

Montgomery County Regional Services Contacts:

Bethesda/Chevy Chase: Thomas Dant

<u>Thomas.Dant@montgomerycountymd.gov</u> (240-550-4020)

East County: Ayanna King

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Mid-County: Talia Beaulieu-Hains

<u>Talia.Beaulieuhains@montgomerycountymd.gov</u> (240-927-3632)

Silver Spring: Nahom Tekle

Nahom.Tekle@montgomerycountymd.gov (240-941-4995)

UpCounty: Jake Adler

<u>Jake.Adler@montgomerycountymd.gov</u> (240-447-0216)

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