

# APPLICATION COVER PAGE

Youth Sports Grant Program

Fiscal Year 2017-2018

(Exhibit B) Please attach this cover page to all applications with supporting documentation that has been reviewed and authorized by Duarte Youth Athletic Club for submittal to the City of Duarte for final approval. Criteria & individual grant distribution to be determined by DYAC.

FOR ORGANIZATION USE ONLY	
Date:	Invoice Number:
Sports Organization:	
Sports Activity Description (i.e. pee-wee/age group etc):	
Youth's Name & Contact Information:	
What percentage of registration fee does grant cover:	%
Total Grant Amount \$ _____	
The following information has been received from applicant: (Circle)	
Income Verified:	Yes      No
Proof of Residency:	Yes      No
Completed Application:	Yes      No
Received By:	
Name/Title & Signature of Authorized Organization Representative:	
Comments:	
Approved By:	Approval Date: