



Terry Bauer Moon Tunes
Special Projects Fund
Project Funding Request Form



1. Scope of Support

The Fund will support community programs and projects that benefit the Greater La Crosse Area, with the outcome of creating a better place to live, work, play, and visit. For purposes of this Fund, the Greater La Crosse Area refers to communities in counties that adjoin La Crosse County and communities with a Rotary club participating in the Rotary Works Foundation.

2. Areas of Consideration

Initiatives promoting the arts, beautification, recreation, health, and social well-being will be considered. Special attention will be given to music, music education, and music-related programs and projects.

3. Funding Parameters

Funding may be considered for: one-time or start-up requests for new community projects, programs or equipment; or, improvements to existing community projects, programs or equipment. Projects must demonstrate a measurable impact on community quality-of-life. Fund requests are not intended for general operation or administration expenses.

4. Distribution Guidelines

Requests for funding will receive priority if originating from the La Crosse Valley View Rotary Club, followed by requests from local Rotary clubs participating in the Rotary Works Foundation. Local community requests from government and nonprofit charitable or service organizations will also be considered but given lower priority.

Name of Project: _____

Name of Organization: _____

Address: _____

City/State/Zip: _____

Project contact name: _____ Title: _____

Phone: _____ Email: _____

Project Location: _____

Project start date: _____ Target completion date: _____

Please answer the following questions in the space provided.

- 1. Description of the project.

2. How will the community benefit from this project?

3. Who in the community will be directly impacted by this project?

4. How will this funding be used? Please attach your project budget.

5. How much money are you requesting?

6. Provide one of the following: IRS Determination Letter, W-9 tax form or EIN.

Print name of person completing application: _____

Signature: _____ Date: _____

Please submit application to: VViewRotary@gmail.com or mail to:

Terry Bauer Moon Tunes Special Projects Fund

c/o: Valley View Rotary Club

PO Box 545

La Crosse, Wi 54602-0545