

NATIONAL CATHOLIC SOCIETY OF FORESTERS

320 S. School Street - Mount Prospect, IL 60056-3334 - 1-800-344-6273

APPLICATION - HEARTS AND HANDS PROGRAM

DATE: _____

RETURN THIS FORM TO THE COURT RELATIONS DEPT. OF THE HOME OFFICE FOR APPROVAL. PLEASE PRINT CLEARLY.

Court Name and Number: _____ City: _____ State: _____

Contact Person: _____ Phone #: () _____

The officers of the court have reviewed the guidelines for participation in the program and understand the requirements (refer to the Hearts and Hands brochure for details).

PLEASE CHECK ONE:

_____ *Sole Sponsor* of this project. NCSF will match funds up to \$1,000.
All publicity will show NCSF as the *only* sponsor of the activity.

_____ *Co-Sponsor* of this project. NCSF will match funds up to \$500.
We will work with another group to hold this activity, such as the Home School Association, parish counsel, etc.

We understand that we are required to involve adult and junior members of the court and to keep an accurate account of the project funds. We must submit a Hearts and Hands summary form to receive final approval and matching funds.

RECIPIENT: _____ Individual _____ Family _____ Community _____ Parish

Check can be payable to any parish or community organization. If the event is to assist an individual or family, the check must be made payable to a bank trust (or similar account) on their behalf.

This project is being held to benefit: _____

We chose this recipient for a Hearts and Hands program because: _____

DESCRIPTION OF THE FUNDRAISER/PROJECT:

Our court plans to: _____

Place and address of the project: _____

Event date: _____ Event time: _____ Attendance fee? _____

Do you need flyers? _____ How many? _____ Please provide information for the flyer.

Local newspaper name and address for your press release (please include their e-mail address or web site): _____

Court member's name and phone no. for contact information to be printed with your press release: _____

TWO SIGNATURES ARE REQUIRED:

_____ Phone #: () _____ Date: _____
Court President signature

_____ Phone #: () _____ Date: _____
Court Officer signature

HOME OFFICE USE:

Approval given by: _____ Date: _____

Application No: _____ Summary Sent: _____ Press Release Sent: _____

Flyers Sent: _____ Sales Mgr. Copy: _____