



Mail Completed Application To:
SCI Yampa Valley Chapter
PO Box 752
Craig, CO 81626
Phone (970) 826-0089
Web Site:
sciyampavalleychapter.com



Date : _____

Name of Organization / person applying : _____

Address _____

City _____ State _____ Zip _____

Telephone # _____ E-mail address _____

Person making the presentation _____

How much are you requesting : _____

Give a brief statement why you want SCI to fund the event _____

Give dates that this event will take place and where _____

If funding is received, how will this help further SCI in, Conservation, Education ,

Humanitarian _____

It is recommended that you return back with the stats if requested by SCI Yampa Valley Chapter.

Board use only : Approved [] Disapproved [] List any other stipulations placed on applicant.