

# FBXRG

## FAIRBANKS ROLLERGIRLS

### Bout Funds Recipient Application

Name of Organization: \_\_\_\_\_

Tax ID #: \_\_\_\_\_ Are you a 501(c)(3) organization?  Yes  No

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Website: \_\_\_\_\_

Is your organization:

interested in selling tickets for the bout?  Yes  No

willing to distribute flyers for the bout at your location?  Yes  No

willing to staff an information table about your organization at the bout?  Yes  No

Date organization established? \_\_\_\_\_ Date of last tax return filed? \_\_\_\_\_

Briefly describe your organization: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What is your exempt purpose? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How will the funds from our bout benefit your organization and further your exempt purpose? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How did you hear about this opportunity? \_\_\_\_\_

I agree any funds received from FBXRG will be used to further our exempt purpose: \_\_\_\_\_

*signature*

Please return to:  
Fairbanks Rollergirls  
Attn: Bout Funds Recipient Application  
770 8th Ave. Fairbanks, AK 99701

Any questions? Please call 907-457-7655 (457-ROLL) for more details and information. *Thank you!*

FOR OFFICE USE ONLY	
Current filings with:	
State	_____
IRS	_____
Pub 78	_____