



San Marcos Lions Club

2024-2025 Grant Request Form

Date: _____

Organization Name: _____

Address: _____

EIN/TID Number: _____

Contact Name: _____

Contact Phone: _____

Contact email: _____

Is your organization located in San Marcos? Yes or No

Are you a member of the Lions Club? Yes or No

Are you willing to present at a Lions Club meeting? Yes or No

Amount Requested: _____

What Lions Club Focus Area would your request address? (Check all that apply)

___ Pediatric Cancer

___ Diabetes

___ Environment

___ Vision

___ Hunger

___ Youth Support

___ Other: _____

Has your organization received a grant in the past from the San Marcos Lions Club? Yes or No

If Yes, what were the funds used for?

What other sources of funding do you have for this organization?

What Percent (%) of your organization budget would be met by the Lions Club contribution if funded the full amount requested? _____

If awarded a grant this year, what will the funds be used for?

Please provide any additional information which is pertinent to your request.

Please return document to:

Corey Wheeler, Grant Coordinator

grants@sanmarcoslionsclub.org

Phone: 512-787-5825