



IOWA PGA FOUNDATION PILLAR GRANT APPLICATION

Name of PGA Professional or Person applying: _____

PGA Member # _____ Facility Name: _____

Facility Address: _____

City: _____ State: _____ Zip: _____

Facility phone# _____ Primary Contacts mobile # _____

Primary Contacts email: _____

Name of Golf Program for which you are requesting a grant: _____

Website for program: _____

Amount Requested for grant: \$ _____ Have you received a grant previously? Y or N

What audience does the program serve? _____

What budget amount is contributed by the facility or PGA Professional? \$ _____

What in-kind budget amount is being contributed by the facility/PGA Professional? \$ _____

What will your program's in-kind contribution include? _____

Include within the application:

- Program budget
- Description and history of program which application for grant funds will support
- Program materials, marketing plan, location for program to be conducted
- Staffing issues and assignments
- In-kind or budget dedicated to program for success
- Additional pertinent information

I, _____ attest the submitted information for this grant request to be true and accurate. I also commit to submitting a year-end report as requested by the Iowa PGA Section Foundation Board.

Date: _____ Signature: _____

Send completed applications and materials via mail or email (tgoudy@pgahq.com) to:
Iowa PGA Foundation Grant
Tess Goudy, PGA
Assistant Executive Director
3184 Highway 22
Riverside, IA 52327