

## 2009 AIDS Walk - Fund Recipient Application

Organization Information			
Organization		Phone	
Address		Contact	
City, State, Zip		Type of Organization	

Funding Information			
Is the organization funded by the state?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If Yes, what percentage of the total earnings does this funding account for?	%
Is the organization a recipient of any community grants?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If Yes, what percentage of the total earnings does this funding account for?	%
Is the organization a recipient of charitable contributions?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If Yes, what percentage of the total earnings does this funding account for?	%
If the organization were to be a recipient of funds from the Reno AIDS Walk, how would they be used?			
Why does your organization need these funds?			

Other Information				
What year was the organization founded?		By whom?		For what purpose?
How do you promote your organization to the public?				
What does the organization accomplish in a typical week/month?				
What are the biggest challenges the organization faces when helping people with AIDS?				
What is your involvement with the Reno AIDS Walk?				

Please attach any other additional information you feel is important in the decision making process.

**Fax all documentation to 877-825-AIDS by May 31, 2009**

An independent panel of judges will select the recipient of this year's funds to be announced the day of the Reno AIDS Walk.