

LEGENDS FOR KIDS YOUTH FOUNDATION GRANT APPLICATION

HuVee SANFORD



Mission

Our mission is to play a part in providing our area's youth with the tools and confidence to help them make the right decision in life; to provide our youth with the opportunity to experience the positive influence that sports can play in teaching self-discipline, teamwork, leadership and strategic thinking skills while building self-confidence; and to provide an annual event where area youth can gather for FREE specialized training in multiple sports under the supervision of the area's best coaches and athletes.

Grant Guidelines (Please read carefully)

1. Priority will be given to youth projects and organizations which have substantial volunteer involvement and to organizations who have demonstrated support for the Legends Mission.
2. Grants will be awarded **ONLY** for capital improvements such as equipment and uniforms. The focus of the foundation is sports. The foundation will not support fundraising activities such as program ads or special events.
3. Minimum grant request is **\$500**.
4. Application Dates & Deadlines:
 - i Grant application must be **RECEIVED BY Friday, September 17, 2021**
 - ii Grants will be awarded on or before **Friday, October 8, 2021**
 - iii ALL Grant Award Winners **MUST** submit proper documentation (invoices) for payment and it must be **RECEIVED BY the end of business (5 pm) on April 22, 2022** to be awarded.
5. Applicants will be notified of the Board's decision by e-mail and a letter.
6. Each recipient is required to submit a copy of an invoice or a committed purchase order for the release of the grant check (**Must be received prior to April 23, 2021**). Please send to: **Legends Grant Program, Attn. Brad Coleman, GSS National Campus – Community Relations, 4800 W. 57th St, Sioux Falls, South Dakota 57108**. Once all the proper paperwork has been submitted checks usually take 3-4 weeks to be delivered
7. Legends respectfully request the use of the **Legends logo** for recognition of funds granted. Examples may include logos for uniforms, batting cages etc. Each recipient needs to have the legends logo displayed on the uniform or capital improvement. Legends for Kids Foundation will NOT supply the logo equipment, but will provide the correct logo for use. We ask that applicants send their result photos to Legends Grant Program at the above address.
8. The Legends B.O.D. reserves the right to withdrawal any grant at any time with Board approval.
9. The Legends Grant Committee **REQUIRES** that each organization that is granted a 2020 Legends Grant will provide a minimum of **three (3) volunteers** to assist us with **one of any number of different volunteer opportunities that Legends will ask for help, that includes the golf tournament, helping at Legends Free Clinics, and more**. Failure to do so will result in no further grant application consideration in the future.
10. Please attach additional pages in response to each question if more space is needed.

Project Information (all fields are required)

Name of your organization: _____

Address of your organization: _____

Name of Board President or Authorized Rep: _____

Telephone number: _____ Cell: _____

E-mail address of organizational contact: _____

Amount Requested: _____

Total Cost of Project: _____

Project Description:



How will the remaining money be raised?

How many student-athletes (children) will be affected or impacted by this grant? _____

Has your organization received a Legends for Kids Grant in the past? If so, when and how much?

Please provide a detailed budget on a separate sheet.

Projected Completion Date of Project: _____

Provide a brief history of your organization. Please attach any brochures, flyers, background information or further explanation you feel would help the Foundation Board make its decision. Include the year the organization was founded and your primary source of funding.

Add any additional information you would like to provide:

Agreement

By signing this grant application, you agree to:

- Use grant money for the purposes detailed in your application.
- Keep accurate financial records.
- Allow your project to be used in any media or public relations campaign, including interviews with and photos of you.

Organization's Board President or Authorized Rep

Date

Required Exhibits - Please INITIAL to indicate that one copy of EACH item is included:

- ____ The IRS letter of tax exemption 501(c)(3), if applicable
- ____ A detailed budget for project

After you have completed this application, please return it to:

Legends for Kids Youth Foundation
Attn: Brad Coleman - Sanford Community Relations
4800 W. 57th St, Sioux Falls, SD 57108

To email application: Sent to brad.coleman@sanfordhealth.org

