

**Lutheran Church of the Redeemer**

**Charleston, South Carolina**

## ENDOWMENT FUND APPLICATION

Name of Organization/Person \_\_\_\_\_

Address \_\_\_\_\_

Name of Contact Person \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

### PROJECT INFORMATION

Amount Requested \_\_\_\_\_

Describe the purpose of your project. Include who/what will benefit from your project. (Use a separate sheet if needed.)

From where does your organization receive its funding? (fees, donations, sales, or something else)

When will this grant be used?

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

Mail or hand deliver this application by APRIL 30<sup>TH</sup> to:

Lutheran Church of the Redeemer  
Endowment Fund  
714 Riverdale Drive  
Charleston, SC 29407

or email to:  
**financial@redeemercharleston.net**