



HARRISBURG COMMUNITY FOUNDATION RELIEF FUND GRANT APPLICATION

Thank you for your interest in the Harrisburg Community Foundation (HCF) Community Relief Fund grant. Please complete the application below to help us better understand the need for assistance. Funds will be awarded on based upon need, up to a maximum of \$1,000 per application/situation. All applications will be kept confidential.

GENERAL INFORMATION	
Date of Application:	
Name of Applicant:	
Address:	
Phone:	E-Mail:
REASON FOR FUNDING REQUEST	
Amount Requested:	
Why are you requesting assistance from the community relief fund?	
If assistance is granted, what will the funds be used for?	
Applicant Signature	Date

Mail completed application to:

Harrisburg Community Foundation
Attn: Community Relief Fund
P.O. Box 343
Harrisburg, SD 57032