freshchoice richmond

Application Form

community FUND

Individual/Organisation's name:

Name of person requesting funds:

Contact phone:

Street address:

Individual/Organisation's activities:

Email address for notification purposes:

Amount requested (up to $500.00 unless advised) **:**

Reason (please outline briefly what the money will be used for and how this will be of benefit) **:**

Thank you for completing our application form. Many organisations and people do a great job in the community and at FreshChoice we like to support them as much as possible. At the end of the month we will advise whether or not your application is successful. If your application is successful, we request a photograph and short summary of how your organisation has benefited from the donation. Your photo and story maybe published.

Please give this application form to a customer representative.

Locally Owned & Operated