



Grant Application

Date	501(c) (3) number
Name of organization and address	
Name & phone number of contact person	Name of Board Chair
Name of President or CEO	% Board members contributing to project or campaign
Brief background of organization and mission	
Description of the overall project	
Total cost of project	Amount to be requested, if known
Evidence of community support	

Please attach:

- List of Board of Directors
- Project budget, if applicable

Mail the completed application to:

Lisa Beth Gerstman Foundation
439 Oak Street, Suite 1
Garden City, NY 11530

You may also fax the application to:

516-594-7085

Bringing the summer camp experience to children with special needs.