Garrison Area Improvement Association Grant Application

Contact Information

Name/Business: _____ Address: _____

Phone: _____ Email: _____

Grant Selection:

☐	Business Start Up Program	☐	Entrepreneurial Grant	☐	Fundraising Grant
☐	Business Improvement Grant	☐	Daycare Provider Grant	☐	Community Group Grant
☐	Business Transition Grant	☐	Essential Service Housing Grant	☐	Fishing & Hunting Guide Incentive
☐	Matched Marketing Grant	☐	Community Betterment Grant	☐	Fishing & Hunting Guide Marketing Grant
☐	Internship Grant	☐	Community Event Creation & Enhancement Grant	☐	Business Event Grant
☐	Employee Recruitment & Retention Program	☐	Local Community Development Project Incentive	☐	_____

Disclaimer: Certain conditions may apply to some grants; see Grant Flyer for more details.

Project Information

Description of Project (Please include any bids):

_____

_____

Please disclose any additional funding or contribution to your project:

_____

_____

Have you applied for any other grants? If so, with whom and for how much?

_____

Amount Requested: _____ Estimated Start Date: ____/____/____

Estimated Completion Date: ____/____/____

Agreement

As a recipient of GAIA Grant Funds, I (we) agree to the grant requirements as outlined in the guidelines I (we) received. I (we) agree to complete the project within the required time frame.

_____ Date: ____/____/____

Grant Recipient or Representative

GAIA Board Action

Approved ____ Amount Approved: _____ Denied ____ Date: ____/____/____

Funding Source: _____ GAIA Representative: _____