



# NORTHSHORE COUNCIL PTSA GRANT REQUEST FOR EDUCATIONAL SPEAKERS AND COMMUNITY EVENTS

## REQUESTOR INFORMATION

Requesting PTA(s): \_\_\_\_\_

Name(s) of Requestor(s) and Role on PTA:  
\_\_\_\_\_

Email(s): \_\_\_\_\_ Phone(s): \_\_\_\_\_

**I/we understand that all grant requests must receive approval from our local PTA Board of Directors.**

Please provide contact information of a Board of Directors member for verification (Name, Email, Phone): \_\_\_\_\_

## EVENT INFORMATION

Event Title: \_\_\_\_\_

Will this event be open to the community? Yes \_\_\_ No \_\_\_

Proposed Event Date: \_\_\_\_\_

Proposed Location: \_\_\_\_\_

Local PTA(s) Participating: \_\_\_\_\_

School(s) Participating: \_\_\_\_\_

Speaker(s) and Organization(s) Participating:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**Describe Event Purpose and Target Audience. Please attach any supporting documentation and/or website links.:**

## FUNDING

Cost Breakdown	Expected Cost	Requested Grant Amount
Venue		
Speaker(s)/Vendor(s)/Organization(s)		
Supporting Materials		
Promotion		
Other:		
Total		

Are there additional funding sources: Yes \_\_\_\_ No \_\_\_\_

If yes, please identify from where/who and for how much:

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Please email this application to [vp@northshorecouncilptsa.org](mailto:vp@northshorecouncilptsa.org) OR mail to: Northshore Council PTSA, P.O. Box 1461, Bothell, WA 98041

## NORTHSHORE COUNCIL PTSA TERMS AND CONDITIONS

Grant requests must be made by a Northshore School District PTA in good standing and be approved by that PTA's Board of Directors.

All charges/costs above the awarded grant amount are the responsibility of the requesting local PTA.

The Northshore Council PTSA logo will be provided and must be included on ALL promotional materials.

Council will help promote the event and, if needed, can assist with the creation of social media banner ads or flyers, if given enough notice.

## FOR NORTHSHORE COUNCIL PTSA USE

Date Received: \_\_\_\_\_ Request Verified \_\_\_\_\_ Date Reviewed Council BoD: \_\_\_\_\_

No Award: \_\_\_\_\_ OR Awarded/\$ Amount: \_\_\_\_\_

Follow Up with Requestor(s):

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