



**County Commissioners of Kent County, MD  
FY21 Youth Sports Equipment Grant Application**



**Submission deadline: 3 pm, February 1, 2021**

**Youth Sport Organization Information**

Legal Name	
Mailing Address	
City, State, Zip Code	
Organization Leader/President	
Contact Telephone Number	
Contact Email Address	
# of Youth Players Served Annually	

**FISCAL RESPONSIBILITY ACKNOWLEDGEMENT**

The applicable leaders/officers of the organization named above have reviewed this application and attests it is consistent with its athletic or recreational program goals. The organization is prepared to be the fiscal agent for the award, to disburse the funds, and ensure the funds are used for the equipment/purpose listed herein.

\_\_\_\_\_  
\*Organization's Fiscal Agent/Treasurer Name

\_\_\_\_\_  
Signature Date

**EXCECUTION**

The organization named above has executed this application on the \_\_\_\_\_ of \_\_\_\_\_, \_\_\_\_\_.  
(day) (month) (year)

\_\_\_\_\_  
\*Organization Leader/President Name

\_\_\_\_\_  
Signature

*\*Must have signature authority for the organization.*

**Detailed description of need for funding:**

**Positive outcomes as a result of the funding:**

**Impact to organization/program if not funded:**

**\*Total Equipment Cost**

Item Description	Amount
If must applicaiable include items to be purchased with matching funds above (noted with *)	
Attach additional sheets and supporting documents only if necessary	
<b>*Total Cost</b>	\$ -

**\*Matching Funds**

Source	Amount
◆ Fields with "*" must be completed and may not be left blank	<b>*Total Match</b> \$ -
	<b>*Request</b> \$ -

Request is Total Cost minus Total Match and must be \$2,000 or less

**NOTICE:** *A minimum of (3) quotes is required to be submitted with the application. Each quote must clearly indicate the grand total of the potential purchase. Application may be rejected if required number of quotes is not included.*