THE HEISER FOUNDATION

GRANT REQUEST FOR AID

GRANT REQUEST TO ASSIST IN FUNDING OF REQUESTS
THAT DIRECTLY REFLECT
THE HEISER FOUNDATION MISSION STATEMENT
(go to theheiserfoundation.org to view the Mission Statement)

Eligibility

Compliance with the Mission Statement of The Heiser Foundation. Please explain with a short (300 to 500 word) concise written description of event(s) that qualify under the Mission Statement. Please include all parties that will benefit from this grant.

Grants will be awarded quarterly on a priority basis at the discretion of the Foundation Directors.

Last Name:_____ First Name:_____

Address:_____

City:_____ State:_____ Zip Code:_____

Telephone: (_____) ____-_____Email:_____

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Mail your Grant Request form to: The Heiser Foundation
10 Beach Street
St. Augustine , FL 32080

Or email to: theheiserfoundation66@gmail.com