

Oklahoma City Landrunners  
Community Assistance Program  
Application



**Organizational information:**

1. Name of Organization: \_\_\_\_\_

2. Type of Organization: \_\_\_\_\_

3. Complete Mailing address: \_\_\_\_\_

\_\_\_\_\_

4. Contact name: \_\_\_\_\_

5. Job Title: \_\_\_\_\_

6. Office and/or Mobile phone number of contact: \_\_\_\_\_

7. E-mail address: \_\_\_\_\_

8. Name of OKC running club Member making the recommendation for assistance:

\_\_\_\_\_

9. Brief description/ History of Organizational activities related to the OKC community.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**Event / or Need Information: *Please complete as applicable.***

1. Event name: \_\_\_\_\_

2. Event date: \_\_\_\_\_

3. Event Location/Address: \_\_\_\_\_

4: Date funding needed: \_\_\_\_\_

Use only the space below for comments regarding the event or request. Clearly and concisely state and explain:

***a. How this would promote health and fitness for all through recreational running, or benefit the running community?***

***b. How you will spend the money?***