## **POP Pitch Application**

**DUE: October 19, 2020** 

11:59 PM Central Time



Please be sure to complete all sections of this application. Incomplete applications will not be accepted.

Charity Name:	
Tax ID:	
(If you are a fiscally sponsored charity please pr	ovide the name and Tax ID of your sponsor)
Headquarters Address:	
Name:	Title:
Email:	Phone:
Nonprofit Operating Budget:	<del>_</del>
Please attach 250-word project/program description.	. Please include the following information:
<ul> <li>Articulate your need.</li> </ul>	<ul> <li>Demographics of constituents you serve.</li> </ul>
<ul> <li>Full amount required.</li> </ul>	<ul> <li>How this funding will help your program.</li> </ul>
<ul> <li>Estimated timeline for launching program.</li> </ul>	What other funding amounts have already
<ul> <li>What sports are involved in your program.</li> </ul>	been secured (you are eligible even if no other funding has been previously secured).
<ul> <li>Number of people anticipated to serve.</li> </ul>	
Dates for "Pre-Pitch" FREE coaching session (ple	ease circle all times that you are available-Central Time).
Wed. October 21st 8:00AM 8:30AM 9:00 AM 9:30	DAM Thur. October 22nd 8:00AM 8:30AM 9:00 AM 9:30AM
Only registered participants of Sport	ts Philanthropy World Conference may apply.
Please use the code <b>POP</b> while registerin	g to ensure your eligibility and receive a \$50 discount.
	elication is selected, I will be required to participate in a FREE to pitch my project or program at the Sports Philanthropy
(Please initial): I fully understand that POP Pitch	is a competitive process and applications are selected on the
basis of: accuracy, readiness, need and anticipated imp	pact. No late applications will be accepted for any reason.
(Please initial): If selected, I agree to provide a	6-month report to funder(s).
Signature:	Date: