

**Greenbrier District United Methodist Church**

**GO TEAM SUPPORT FUNDS APPLICATION**

Applicant Name: \_\_\_\_\_

Church: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name of Project or Program: \_\_\_\_\_

Location of Project or Program: \_\_\_\_\_

Date of Project or Program: \_\_\_\_\_

Describe your project or program:

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How will your project or program reach people outside the walls of the church as we seek to make disciples:

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Tell us about the total cost of the project or program. If additional funding other than support funds is needed, from where will it come? If this will be an on-going

project or program, how will it be funded in the future?

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What are your goals for the project or program? How many people will be reached? What is the plan for follow-up to maintain new relationships that may be formed?

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If more space is needed to adequately answer the questions, please use additional paper.

Once the project or program has taken place please send pictures and a story for the District Newsletter.

Amount Requested: \$ \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pastor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Lay Leader's Signature: \_\_\_\_\_ Date: \_\_\_\_\_