

# Mamrelund Lutheran Church

## Endowment Fund Disbursement Request

Applications for grants from the Mamrelund Lutheran Endowment Fund must be submitted in writing using this form. Additional information may be included on a separate sheet of paper. Requests will be reviewed by the Endowment Committee.

Our mission is to the people of God. To worship God, study God's word, and communicate the Good News of salvation through Jesus Christ. To provide leadership and support so people may gather for spiritual growth, worship, education, fellowship, and sharing of joys and concerns and to offer hospitality and care to all in our congregation, our community, and the world. Every member, young and old, is an integral part of the body of Christ. Each one has time, abilities and treasures to offer in order that the will of God may be accomplished.

Monies for distribution will be considered for legally qualified non-profit recipients that have qualities which are consistent with the Mission of Mamrelund Lutheran Church. According to the Bylaws of the Endowment Fund grants will be considered:

- a. To strengthen God's mission through the Church
- b. To reach out in response to human need
- c. To make grants for promoting Christian religion and Christian charity
- d. To support education for Christian life and service

Date of Application \_\_\_\_\_

Name of Organization/Committee/Congregational Member

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Contact Person \_\_\_\_\_

Email address \_\_\_\_\_ Phone \_\_\_\_\_

Project Title \_\_\_\_\_

Amount Requested \_\_\_\_\_ Project Duration: \_\_\_\_\_

Is the project time sensitive? Yes No \_\_\_ If yes, what is your deadline date? \_\_\_\_\_

When will the funds be required? \_\_\_\_\_

Is this an annual event or expense? \_\_\_\_\_

How will future costs be met? \_\_\_\_\_



**PROVISIONS**

Please submit your application to the Mamrelund Lutheran Endowment Fund by leaving it at the church office or mailing it to the following address:

Mamrelund Lutheran Church  
c/o Endowment Fund Grant Request  
4085 Lutheran Church Rd.  
Kent City, MI 49330

**SIGNATURE**

I/We certify that the information I/We have provided in this application is true and accurate to best of my/our knowledge. I/We agree that if awarded money from this Foundation program, I/We will utilize these funds only for the purpose that was outlined in the application submitted to the Endowment Committee.

I/We also give the Endowment Committee permission to have the information submitted in this application reviewed by the committee members and Church Council, and give permission to the Endowment Committee to publicly acknowledge me/my/our committee as a person/group requesting funds.

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Signature of Applicant(s)

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Date

For Committee Use Only

Application #