

**BOROUGH OF PINE HILL
FUND RAISING APPLICATION**

NAME OF ORGANIZATION

ADDRESS:

PHONE:

**CONTACT
PERSON:**

ADDRESS:

PHONE:

DATE OF EVENT:

PLACE OF EVENT:

TIME OF EVENT:

FROM:

TO:

TYPE OF FUND RAISING:

AN APPLICATION MUST BE FILED FOR EACH SEPARATE FUND RAISING
EVENT.

APPROVED:

DENIED:
