



**The Garden Club of Georgia, Inc.  
Plant 4 Hope  
Grant Application**

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

Name of Club: \_\_\_\_\_

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

Person(s) who may be contacted: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

(1) Please give a brief description of the project for which Plant 4 Hope monies are being requested.

(2) What matching funds will be used to satisfy the grant requirement?

(3) Total project cost? \_\_\_\_\_

(4) What is the name of the facility? \_\_\_\_\_

(5) How many members are in your club? \_\_\_\_\_

What percentage will participate? \_\_\_\_\_

Please include the following required materials with application:

- (1) a work plan
- (2) receipts for expenses
- (3) before and after pictures
- (4) a letter of acknowledgement from the facility

\_\_\_\_\_  
Signature

Send application to: Sara Lanier, 11 Tanglewood Rd., St. Simons Island, GA 31522  
Phone Number: 912-638-2621 or email [jlaniert@technonet.com](mailto:jlaniert@technonet.com)