



NATIONAL HEADQUARTERS:
53 WEST JACKSON BLVD.
CHICAGO, ILLINOIS 60604-3795
(312)427-6065 FAX: (312)427-6524
Web site: www.navs.org
Email: NAVS@NAVS.org

The National Anti-Vivisection Society

Sanctuary Fund Application Form

Name of Organization: _____

Address: _____

City/State/Zip: _____

Phone: _____

Fax: _____

E-mail: _____ Web site: _____

Key Contact: _____

Amount of funding requested: _____

Date of Incorporation: _____

IRS Status (Please supply IRS Letter of Determination): _____

How did you hear about us? _____

Please list state/city/federal agency licenses your organization is required to hold:

Has your organization ever been cited for any violations? If yes, please explain.

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Is your organization a member of any association of shelters or sanctuaries? If so, please list the affiliations.

Mission Statement: _____

Purpose for which funds are requested: _____

Will the funds be utilized for an existing program or is this a one-time expense?

Please identify the estimated % of program costs that NAVS Sanctuary Fund will cover:

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By what date do you need funding? _____

Please attach a copy of your latest audited financial statement.

Signed: _____

Title: _____

Date: _____

Please remember to attach the following information:

IRS Letter of Determination

Latest Audited Financial Statement

Any additional background information on your organization you feel may be useful to us.

Send your completed application to:

Clare Haggarty

The National Anti-Vivisection Society

Sanctuary Fund

53 West Jackson Blvd., Suite 1552

Chicago, IL 60604-3795

Phone: (312) 427-6065 or (800)888-6287

Fax: (312) 427-6524

Email: chaggarty@navs.org