

**TRINITY UMC PUMPKIN PATCH FUND CHARITY/MISSION NOMINATION FORM**

**COMPLETED FORM DUE TO TRINITY OFFICE BY July 22, 2018**

**Applications must be submitted by a Trinity member.**

**Organization must be a non-profit organization.**

**Please nominate only one charity per application.**

**Your Name:** \_\_\_\_\_ **Your Phone Number:** \_\_\_\_\_

**Recommended Charity:** \_\_\_\_\_

**Charity's Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Describe the mission of the charity. How many people are served by this charity?**

**How are you involved?**

**Are other Trinity members involved? How?**

**How this charity impacts the community? How does this charity uphold Trinity's mission? *(to make disciples of Jesus Christ for the transformation of the world by loving God and all people, learning God's will and ways, and living for Christ in the world)***

**Why does the charity need these funds? What difference will the funds make? What is the main source of funding?**