

APPLICATION FOR 2010 ANGEL FUNDING

PURPOSE OF THE PROGRAM	The purpose of the SahlAngel Program is to provide assistance to non-profit agencies within the San Antonio community who need financial support to meet their objectives and goals for the current year.
SOURCE OF ANGEL REVENUE	Angel revenue is generated through the sale of room night certificates; amusement tickets and golf fees all sold by the Association at discounted rates and are valid for one year. These items are donated by the members of our Association in the spirit of creating a revenue source that will ultimately be used to improve the quality of life for our fellow citizens.
THE FUND RAISING SALE	The sale is conducted on the Association's website during the summer of months June through August. 97% of the funds received from the sale will be distributed in fall to the agencies chosen through this application process. Each agency selected will receive an equal share of the revenue from the sale. Once chosen to be an Angel recipient, the agency's only responsibility will be to share the information about the sale with their members, friends, and relatives to help the Association sell as many certificates as possible – the greater the income, the greater share of the profits.

NAME OF ORGANIZATION	*
NAME AND JOB TITLE OF THE AGENCY'S PRIMARY CONTACT	*
STREET, CITY, STATE, ZIP	*
PHONE NUMBER & EMAIL ADDRESS	*
PRIMARY PURPOSE OF THE ORGANIZATION	*
WHAT YEAR WAS YOUR ORGANIZATION RECOGNIZED AS A NON-PROFIT AGENCY PROVIDE TAX ID NUMBER	*Year Federal Tax ID#:
ARE YOU FUNDED BY UNITED WAY?	<input type="checkbox"/> Yes <input type="checkbox"/> No
IF SO, WHAT PERCENTAGE OF YOUR INCOME DOES THIS FUNDING REPRESENT?	% Estimated dollar amount: \$
WHAT ARE YOUR PRIMARY SOURCES OF INCOME?	
DO YOU FINANCIALLY SUPPORT ANY OTHER NON-PROFIT AGENCIES?	<input type="checkbox"/> Yes <input type="checkbox"/> No
IF SO, PROVIDE NAME(S) AND APPROX. AMOUNT OF YOUR ANNUAL SUPPORT.	
WHAT IS THE APPROXIMATE ANNUAL INCOME REQUIRED TO MAINTAIN YOUR DAILY OPERATIONS.	
HOW MANY EMPLOYEES DO YOU EMPLOY?	Full-Time Part-Time
HOW MANY VOLUNTEERS ARE INVOLVED WITH YOUR AGENCY?	
HOW WILL YOU UTILIZE THE MONEY RECEIVED FROM THE ANGEL FUND?	* Special Projects Day-to-day operational expenses
PLEASE PROVIDE A SHORT PARAGRAPH ON HOW YOU PLAN TO USE YOUR PORTION OF THE ANGEL FUND. (ADD AN ADDITIONAL PAGE IF NEEDED)	

Name & Phone number of individual completing this form:

If you have questions concerning this application, call our office: 210.558.6565. Your finished document can be sent by email to: sahla@sbcglobal.net or faxed to 210.558.9986. Mailing address: San Antonio Hotel & Lodging, P.O.830784, San Antonio, TX 78283

***REQUIRED INFORMATION**