



Talbot Partnership Community Stipend Request Form

Amount
Requested: _____
(limit \$250)
Date _____

Name of Organization: _____

Contact: _____

Address: _____

Phone: _____ FAX: _____ e-mail: _____

Purpose of Request: The primary purpose of the Talbot Partnership Community Stipend project is to promote community alcohol, tobacco, and other drug abuse prevention.

1. Explain how the proposed use of funding promotes awareness, education or other activities to prevent alcohol, tobacco and other drug abuse.
2. Explain: a) how you will measure the results of your project or activity, and
b) how you will acknowledge Talbot Partnership's donation of this stipend.
3. Tell how the requested funds will be used.

Start Date: _____

Requests must be received by Talbot Partnership at least 30 days prior to the start date.

End Date: _____

A paragraph describing the results must be sent to Talbot Partnership within two weeks after the end date.

You are invited to contact Talbot Partnership for help completing this form.

Membership in Talbot Partnership is required. If you are not yet a partner, the membership form that follows should be returned with your application.



Talbot Partnership

envisioning a community free of the abuse of alcohol, tobacco and other drugs where youth and adults lead healthy, safe and productive lives.

To become a partner in **TALBOT PARTNERSHIP for Alcohol and Other Drug Abuse Prevention**, please complete the following information.

Your Name _____ Title _____
Address _____ Town _____ Zip _____
Phone(s) _____ FAX _____ E-Mail _____

If Organization, Name _____

Partners receive these benefits:

- Participation in a wide-spread and meaningful community effort
- Prevention resources including
 - Fliers, brochures, books, web-sites and other information
 - Referrals for services
 - Speakers, parent education and training programs
- Access to meeting space and loan of equipment
- Access to community stipends up to \$250 for activities that directly promote the prevention of tobacco, alcohol or other drug abuse
- Publicity for your community events and successes through Partnership advertising, newsletters and meetings

Partners agree to perform three or more of the following each year:

- Complete a brief survey of your organization's prevention activities
- Attend at least one Talbot Partnership breakfast, dinner, retreat or other meeting
- Post and distribute Talbot Partnership and other prevention materials
- Participate on an action team or the Talbot Partnership board of directors
- Provide tobacco, alcohol or other drug abuse prevention activities
- Support prevention activities by
 - Investing \$25 or more (your gift is tax-deductible)
 - Hosting Talbot Partnership events
 - Participating in Talbot Partnership media campaigns
 - Providing a Talbot Partnership presentation or training program
 - Volunteering at First Night or alcohol and drug-free events or programs

Signature _____ Date _____

**Contributions to this 501 C(3) non-profit organization are tax-deductible to the extent allowed by law.*