

APPLICATION FOR A ORIENTEERING USA MAP FUND LOAN OR GRANT

Club Name _____ Application Date _____
 Contact Person _____ Position in Club _____
 Address _____
 City/State/Zip _____
 Telephone(s) _____ Email _____
 Meet Title _____ Meet Date _____
 Meet Type _____ No. of participants expected _____
 Map Name _____ Map Location _____
 Map scale _____ Contour Interval _____ Area (sq.km.) _____ IOF Standard? _____

Map Budget	Cost	MF Request	Date funds are needed	Source of product or service
Aerial photos				
Base map				
Field checking				
Drafting				
Printing				
Totals				No. of copies to be printed _____

Proposed repayment schedule:

1st Payment Date _____ Amount _____ 2nd Payment Date _____ Amount _____

Other funding sources _____

Purpose of the map _____

Promotional value of the map _____

Do you wish to be considered for a portion of this loan to be in the form of a grant? Yes No

If yes, attach a justification to this application. See Map Fund Policy for details.

Mail completed application to:

Linda Ferguson
 561 Rundale Court
 Alexandria, VA 22315
 703/921-2025

cior@aol.com