



## **SALISBURY LODGE NO. 817**

FRATERNAL ORGANIZATION  
BENEVOLENT & PROTECTIVE ORDER OF ELKS  
P.O. Box 1602  
SALISBURY, MD 21802-1602  
410/546-0345 • FAX 410/742-4723

### **Charity Guidelines**

1. All requests should be made using a Charity Funding Request Form. Please include a request amount.
2. All requests must come from non-profit organizations. (The Elks cannot donate to individuals through the Charity Committee funds.)
3. No donations are “automatic” and each year donations will be reevaluated based on needs and finances.
4. Funding of dinners, outings, travel, and other junkets will be limited. Direct donations will get greater consideration.
5. Funding that includes partners such as Moose Lodges, VFW’s, American Legions and other nonprofit service organizations will receive greater consideration.
6. All funding requests that involve the Elks golf course and swimming pool must be channeled through the golf and pool management before consideration by the Charity Committee. See also guideline #5.
7. Funding for Golf related events will be accepted based on the following criteria:
  - a. Being held at the Elks Golf Course
  - b. Being sponsored by another Elks Lodge
  - c. Being sponsored by another local fraternal organization (see #5)
  - d. Other requests are unlikely to be funded beyond a hole sponsorship
8. Scoring Criteria-
  - a. Elks Charities (ENF, Camp Barrett, Special Requests)
  - b. At risk youth programs
  - c. Scouting
  - d. Illness and distress
  - e. Youth sports

- f. School organizations
  - g. Civic Organizations
9. Other Criteria
- a. Local charities will get preference.
  - b. Smaller request amounts will have a greater chance of being approved.
  - c. The Charity Committee meets monthly so please allow a **minimum** of 30 days to process requests.
  - d. All requests should be sent to Elks #817 Charity Committee at 401 Churchill Ave., Salisbury, MD. 21801 or FAXED to 410-742-4723.

**Salisbury Elks #817**  
**Charity Funding Request Form**

Date \_\_\_\_\_ Organization Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Contact \_\_\_\_\_ Phone \_\_\_\_\_

**Program Information**

Funding Amount requested \_\_\_\_\_ (Must be filled out)

Describe Community Need to be filled with this funding:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_

To be filled out by committee- Meeting Date \_\_\_\_\_

APPROVED      NOT APPROVED      AMOUNT \_\_\_\_\_

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Return receipt

Elks Charity Committee has hereby    approved      not approved

your request for funding. If approved the amount is \$ \_\_\_\_\_.

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**Return Mailing Info (please fill this out):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To: Elks Charity Committee  
401 Church Hill Ave  
Salisbury, MD. 21801  
FAX 410-742-4723