



Harrison Neighborhood Association National Night Out Micro Grant Application

Name _____

Address _____

Email _____

Amount Requested (up to \$100) _____

What type of supplies do you need?

I agree to use these funds for my National Night Out Block Party on August 1, 2017

Signature

Date

Return to HNA at dave@hnampls.org or in-person at 503 Irving Ave N, Suite 100