

Western District Conference Hope Fund: Support for WDC congregations and ministers in response to emergencies, natural disasters and crises

Application Form for Congregations:

Congregation name: _____ Date: _____

Mailing address: _____

Meeting place (if different from mailing address): _____

Pastor name and contact information: _____

Congregational leader/representative name and contact information: _____

Grant funds requested and description of expenses (e.g. rent, utilities, repairs, lodging, food, support for pastor or members of the congregation or community, etc), and how these needs result from the impact of the pandemic, natural disaster or other emergency.

\$ _____ Purpose: _____

\$ _____ Purpose: _____

\$ _____ Purpose: _____

\$ _____ Purpose: _____

\$ _____ = TOTAL Hope Fund grant request

Send application or questions to WDC at wdc@mennowdc.org or PO Box 306, North Newton, KS 67117, phone 316-283-6300.