



2008 Community Action Program (CAP) Spread the Word Guidelines

History and Purpose

The Women's Sports Foundation's **Community Action Program (CAP)** encourages communities to support and celebrate the grassroots participation and achievements of girls and women in sports and physical activity. This program brings together community leaders from youth-serving agencies, sports organizations, schools and businesses to promote girls' and women's sports in their local community.

"Spread the Word" is designed to help CAPs carry out the Foundation's mission of increasing awareness through the distribution of educational and promotional materials at their events. **"Spread the Word" is NOT a monetary grant; it provides CAPs with educational and promotional materials for their events at no cost.**

Administration

The Women's Sports Foundation, a national charitable educational organization seeking to advance the lives of girls and women through sports and physical activity, will administer the program.

Eligibility

(One or more may apply)

- Any officially registered CAP that is considered to have "Starting-Up" or "Active" status may apply. "Starting-Up" is defined as any CAP that has registered with the Foundation as of December 31, 2007. "Active" is defined as any CAP that has had at least one event between January 1, 2007, and December 31, 2007.
- Any officially registered CAP planning to hold an event advancing the mission of the Foundation by honoring or enhancing opportunities for girls and women in sports and physical activity by December 31, 2008, may apply.
- The Foundation will review CAP records to determine formation date and event history. CAPs receiving educational and promotional materials must agree to provide the Foundation with a report on how the materials were used, details of the event and at least two event photos.

Application Procedure

- **Only** registered CAPs may apply.
- CAP Coordinators must complete and sign the application.
- Applications **must be received at least two months prior to event** in order to allow time for processing.
- Computer-generated reproductions, faxed originals or downloaded applications will be accepted as long as the application is in the same format and includes all questions and statements as the Foundation original. Applications that do not follow exact format or are missing information will not be accepted.
- Typed applications are preferred.
- Applications may be returned via fax or mail.



**2008 Community Action Program (CAP)
Spread the Word
Application**

“Spread the Word” is NOT a monetary grant; it provides CAPs with educational and promotional materials for their events at no cost. If you are interested in requesting materials for your event please type or clearly print the information requested below.

CAP Name: _____ CAP Coordinator: _____

Company: _____

Street Address: _____

City, State, Zip: _____

Day Phone: () _____ E-mail: _____ @ _____

Event Name: _____ Event Contact: _____
(Only if different from CAP Coordinator)

Event Location: _____
(Only if different from address above)

Event start date/time: _____ End date/time: _____

Projected attendance: Participants _____ Spectators _____ Volunteers _____

Host organization(s): _____

Sponsor(s): _____

Event activities: _____

Participants *(Please check all that apply)*

- | | | |
|---|---|---|
| <input type="checkbox"/> Youth (11 & under) | <input type="checkbox"/> Middle School (12-14 yrs.) | <input type="checkbox"/> High School (15-18 yrs.) |
| <input type="checkbox"/> College (19-22 yrs.) | <input type="checkbox"/> Adult (22-40 yrs.) | <input type="checkbox"/> Senior (40+ yrs.) |
| <input type="checkbox"/> Parents | <input type="checkbox"/> Coaches/Teachers | <input type="checkbox"/> Girls only |
| <input type="checkbox"/> Girls & Boys | | |

Include shipping address if different from above *(Materials will NOT be shipped to Post Office Boxes)*

Name: _____ Company: _____

Street Address: _____

City, State, Zip: _____

I understand that if our CAP receives educational and promotional materials for our event we must provide a report on how the materials were used, details about the event and at least 2 photos to the Foundation **one month** after our event to be eligible for future grants.

CAP Coordinator's Signature: _____ Date: _____

Return application to:
Women's Sports Foundation
Community Action Program (CAP)
 Eisenhower Park
 1899 Hempstead Turnpike
 Suite 400
 East Meadow, NY 11554
 Fax (516) 542-4716