

**Application for The Visionaries Starfish TV Series**



Name of Organization: \_\_\_\_\_

Contact Person/Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Please describe the work of your organization: (feel free to attach additional information)

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

Do you have 501 (c) 3 status? \_\_\_\_\_ Yes \_\_\_\_\_ No

Number of staff members? \_\_\_\_\_ Number of Volunteers? \_\_\_\_\_

What is your annual operating budget? \_\_\_\_\_ What % of your budget goes toward service? \_\_\_\_\_

How many persons on your mailing list? \_\_\_\_\_ Do you have a video? \_\_\_\_\_

Are there any corporations that would be potential sources of underwriting support?

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

How would a profile by The Visionaries help your organization fulfill its mission?

(Please answer on a separate sheet of paper)

How did you hear about us? \_\_\_\_\_

Application prepared by: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for your interest in The Visionaries. All applications and supporting documentation submitted become the property of The Visionaries, Inc., and cannot be returned. Applications will be reviewed and selections made on an ongoing basis. If your organization is selected for a profile, a representative of The Visionaries will contact you.

**Please return application and supporting documentation to:** Charlene LaFerriere  
The Visionaries, Inc.  
748 Page St  
Stoughton, MA 02072