



Wee One Benevolence Request

Purpose: The Wee One Foundation purpose is to assist golf course management professionals and their dependents who incur overwhelming expenses due to medical hardship without comprehensive insurance or adequate financial resources.

Eligibility: Applicants must be a living golf course superintendent, assistant golf course superintendent or an individual employed by a company or organization that services the golf course management industry or a dependent of named applicant and who has suffered a catastrophic medical hardship.

Please describe the situation and the background of the person or family in need. Please include their position in the golf industry, address if accessible, and if they are a member of a local area golf course superintendent chapter, employment history (most recent position) and other information explaining the situation.

Person in need:

Employment

Is the person presently employed?

If yes, what is their position/title?

Employer?

If no, please provide a brief employment history listing companies/positions and tenure if available.

Local Superintendent Chapter (if applicable):

Current Address:

Please describe the situation of need:

Your name:

Email:

Phone:

Once this form is submitted (please submit through email to luke@weeone.org) it will be sent to the benevolence committee. They will use the information provided to deem the extent of the need and funding source. All information will be kept confidential. If you have any questions, please feel free to contact the Wee One Foundation at the above email address or phone (630) 457-7276.