



**Loan  
Application Kit**



**The Michael King Smith Kid's Fund, more commonly known as the Kid Bank, opened in June 1983. It was established to help children start or expand an already existing business and is open to any child 18 years of age or younger. The child must submit this Loan Application Kit, which consists of a form describing the intended project and a business plan. The application **MUST INCLUDE** projected income and expenses, how much money they would like to borrow and how they plan to pay the money back. The Fund Administrator will review all applications and forward them to the board of directors for final approval.**

**This organization was funded by Delford M. Smith, President and owner of Evergreen International Aviation, Inc., in honor of Mark Victor Hansen's entrepreneurial spirit. The fund was reorganized in 2003, and formally renamed the Michael King Smith Kid's Fund, Inc. in memory of Delford's son, Michael.**

**Both Delford and Mark have spent their lives proving their entrepreneurial spirit. Their collective accomplishments include the Horatio Alger Association of Distinguished Americans, the Freedom Foundation of Valley Forge and, in 1999, Delford was awarded The Wright Brothers Memorial Trophy.**

**The Fund is located at the Evergreen Aviation & Space Museum in McMinnville, Oregon. Loan payments at 2% below the national rate will be structured based on projected income. The Fund Administrator will also provide financial counseling to the applicant. If you have any questions regarding the Fund you can contact the Fund Administrator at 503.434.4185.**

**Please send all correspondence to: Evergreen Aviation & Space Museum  
Attn: the Kid Bank  
500 NE Captain Michael King Smith Way,  
McMinnville, Oregon 97128**









## APPLICATION FOR CREDIT

Please fill out completely; incomplete applications will not be accepted.

### YOUR INFORMATION:

FIRST: \_\_\_\_\_ LAST: \_\_\_\_\_

AGE: \_\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_

YOUR PARENT OR GUARDIAN'S NAME: \_\_\_\_\_

YOUR SCHOOL: \_\_\_\_\_ GRADE: \_\_\_\_\_

YOUR TEACHER'S NAME: \_\_\_\_\_

### REFERENCES

Someone other than a family member — such as a teacher, scout leader, Sunday school instructor, coach, family friend, or someone you have worked for. All three REFERENCES must be completely filled out.

#### REFERENCE #1:

FIRST: \_\_\_\_\_ LAST: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

#### REFERENCE #2:

FIRST: \_\_\_\_\_ LAST: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

#### REFERENCE #3:

FIRST: \_\_\_\_\_ LAST: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

### LOAN APPLICATION

LOAN AMOUNT REQUESTED: \$ \_\_\_\_\_

PURPOSE OF LOAN: \_\_\_\_\_

LOAN TO BE PAID IN \_\_\_\_\_ MONTHLY INSTALLMENTS OF APPROXIMATELY \$ \_\_\_\_\_ PRINCIPAL AND INTEREST, OR IF REQUESTING A SINGLE PAYMENT OF

PRINCIPAL AND INTEREST, THE PAYMENT SHALL BE MADE ON \_\_\_\_\_.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE



500 NE Capt Michael King Smith Way,  
McMinnville, Oregon 97128

Phone: 503.434.4185

[www.thekidbank.org](http://www.thekidbank.org)