

I have read and understand the following:

1. I am a paid member of the Greater Philadelphia Chapter of ASA.
2. This grant is being used to support further the works of my support group or for the following project:

(name of support group or project)

3. If the grant is accepted, I will receive half of the total grant money.
4. Within 30 days of the conclusion of the project, I will submit a detailed report of the project (including evaluating remarks) for submission in the Chapter Newsletter and receipts of expenses incurred to the Chapter Treasurer.
5. Upon approval of the report and receipts, the Treasurer will issue the balance of the grant money due—up to the total amount of the expenses incurred.

_____ (signature)

_____ (printed name)

Mail this form to:

ASA, Gr. Phila. Chapter
c/o GRANTS
662 Perimeter Drive
Downingtown, Pa 19335

Deadline for Application: December 31 (assuming funds are still available).

3/00, rev. 3/01, 3/02, 9/02, 1/03, REV 1/04, rev 9/06

Greater Philadelphia Chapter ASA