

HDSA Annual Convention Scholarship 2017

Made possible by Lundbeck



Moving Together

The Huntington's Disease Society of America is pleased to announce it is now accepting applications for scholarships to attend the 32nd Annual HDSA Convention in Schaumburg, IL this June. This scholarship program is made possible by the generous support of Lundbeck.

The intent of this scholarship program is to help families and individuals **who have never been** to an HDSA Convention attend the Society's 2017 Annual Convention.

Scholarship Availability & Application

The scholarship is open only to **first time** Convention attendees who are **not** Illinois or Wisconsin residents. (Illinois and Wisconsin residents please see separate scholarship applications.) Applicants must be 18 years or older as of January 1, 2017. Open to residents of the United States only.

The 2017 Convention Scholarship Application follows this introduction. The application is also available online from the HDSA website (www.hdsa.org/scholarship).

What does the Scholarship cover?

Travel by Plane - Scholarship will cover:

- Round-trip airfare up to \$500 per person for up to four family members (please note you must book and pay for your airfare and you will be reimbursed at the Convention);
- One hotel room for up to four family members at the Renaissance Schaumburg Convention Center Hotel for 3 nights, June 22 June 24;
- Convention Registration Fees for up to four family members; and
- Saturday night Convention Gala tickets for up to four family members.

Travel by Automobile - Scholarship will cover:

- Roundtrip mileage reimbursement at 53.5 cents per mile up to 1,000 miles round trip (distance to be calculated on Google Maps);
- One hotel room for up to four family members at the Renaissance Schaumburg Convention Center Hotel for 3 nights, June 22 June 24;
- Convention Registration Fees for up to four family members; and
- Saturday night Convention Gala tickets for up to four family members.

What doesn't the Scholarship cover?

- Hotel incidentals (You will need to have a credit card and ID to check into your room.)
- Transportation to and from the hotel/airport.
- Meals that are not provided as part of the Convention registration. (Registration includes Friday lunch, Saturday breakfast and Saturday dinner.)

Application Deadline:

Applications must be **received** no later than midnight, <u>Wednesday, April 19, 2017</u>. The application and all required signatures are to be mailed to:

Convention Scholarship Huntington's Disease Society of America 505 Eighth Avenue, Suite 902 New York, NY 10018 Attention: Robert Coffey

Applications may also be submitted via fax to 212-239-3430 or a scanned pdf may be emailed to <u>rcoffey@hdsa.org</u>.

Notification of Winners

Applicants will be notified no later than May 5, 2017 as to whether they have been awarded a scholarship.

Attached: HDSA Annual Convention Scholarship





HDSA Annual Convention Scholarship Application

This, and all following pages, must be completed in full and submitted to HDSA as your "application" for the HDSA Annual Convention Scholarship. All information contained on this application will be kept in strict confidence.

Deadline: Wednesday, April 19, 2017

Determination of Scholarship Awards

You will be notified no later than May 5, 2017 as to the status of your Convention scholarship application.

Applicant (all fields are required, no P.O. boxes please)

Lead Applicant Name:	Birth Date:				
Street Address:					
City:			State:	Zip:	
Home Phone:	'hone:			ne:	
Email Address:					
Special Meal:	Pureed Food	🗆 Veg	etarian	Gluten Free	
Name:				Birth Date:	
Relationship to Applica	int:				
Street Address:					
City:			State:	Zip:	
Home Phone:			Cell Pho	ne:	
Email Address:					
Special Meal:	Pureed Food	🗆 Veg	etarian	Gluten Free	
Name:				Birth Date:	
Relationship to Applica	ant:				
Street Address:					
City:			State:	Zip:	
Home Phone:			Cell Pho	ne:	
Email Address:					
Special Meal:	Pureed Food	🗆 Veg	etarian	Gluten Free	
Name:			Birth Date:		
Relationship to Applicant:					
Street Address:		,			
City:			State:	Zip:	
Home Phone:			Cell Pho	ne:	
Email Address:					
Special Meal:	Pureed Food		etarian	🗆 Gluten Free	

Sections 1 through 7: HDSA Annual Convention Scholarship

1. _____ I and my family members listed on this application have never attended an HDSA Annual Convention before. (To receive a scholarship, you and the family members listed on this application must not have attended a previous HDSA Annual Convention.)

2. Did you apply for a Convention scholarship in a previous year?

_____Yes _____No

If yes, what year? _____

3. Are you actively part of a local HDSA Chapter/Affiliate and/or support group?

If yes, please provide the name of the Chapter/Affiliate and/or support group location.

4. Travel

a. Will you require airfare to Convention: ____ Yes ____No

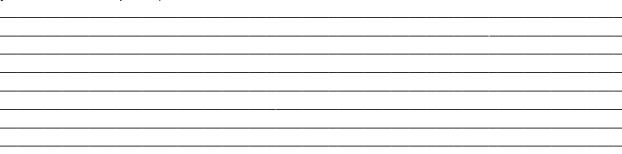
b. If yes, what is your originating airport: _____

c. No, I will be driving to the Convention approximately _____ miles roundtrip.

5. The total 2016 Gross Annual Income for your household was:

- ____ Under \$20,000
- _____ \$20,000 but under \$45,000
- _____ \$45,000 but under \$70,000
- _____ \$70,000 or higher

6. Why do you wish to attend the HDSA Annual Convention and how would a scholarship be beneficial to you and your family? (Please use additional paper if you need more space.)



7. Release of Liability

I hereby accept full responsibility for the safety and care of myself and the family members travelling with me should I be awarded an HDSA Annual Convention Scholarship. I and my family members traveling with me are able to travel on our own and attend the HDSA Annual Convention in Schaumburg, IL without aid or supervision.

Signature of Applicant:

Date:

Print Name: _____

Deadline & Mailing Instructions

This application, including essay, all attachments and required signatures, must be **received** no later than midnight, <u>Wednesday</u>, <u>April 19, 2017</u>.

Applications are to be mailed to:

Convention Scholarship Huntington's Disease Society of America 505 Eighth Avenue, Suite 902 New York, NY 10018 Attention: Robert Coffey

Applications may also be submitted via fax to 212-239-3430 or a scanned pdf may be emailed to <u>rcoffey@hdsa.org</u>.

Application Check list:

Did you remember to... [_] Fill out all fields in the application [_] Sign all the forms

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Thank you! Someone will contact you by May 5, 2017 to let you know if you have received scholarship support.