PRE APPROVAL FORM

Request for HTPA/HTWF Grant Funding for

SERVICE TO THE MILITARY

Requirements for grant approval:

1) Pre-approval – at least 2 weeks prior to event
2) Banner, poster or another public manner easily represents HTWF and HTPA at event
3) Receipts required
4) Photos submitted with receipts for public use in newsletters/reports – PHOTOS are strongly encouraged; these help us visually spread the HTPA/HTWF/HTP message. PUT a disclaimer in your Consent form at the event for photos, and get your volunteers to sign as well.
5) Mileage report submitted with map-quest (or other map application) for reimbursement for fuel

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The following information is required BEFORE your event, and can be simply e-mailed to: info@htprofessionalassociation.com IF you do not get a reply in 3 working days, please call the HTP office at: 210-497-5529

Date:
Name of Applicant:
E-mail contact of Applicant:
Date of Event:
Estimated amount to be requested:
Funding Request is for: (brief description of event):
Grant Application Form
for Healing Touch Service to the Military Events
Healing Touch Worldwide Foundation Designated Fund for HTPA
(Funds must be used for service to the Military)

The following information is required BEFORE your event, - and after Pre-Approval, and can be simply e-mailed to: info@htprofessionalassociation.com IF you do not get a reply in 3 working days, please call the HTP office at: 210-497-5529

Pre-approve was granted on: (date/by)
Date of this Application:
Name of Applicant and Credentials:
HT level completed:
Phone:
E-mail

HTPA Member: (circle) Yes No

Event/Project Name: Date of Event/Project:

Brief Description of Service Event:

Brief Description of Healing Touch Services to be offered:

Estimated Total Funds Requested: $ _________________
(Receipts must be included/attached for all reimbursements)

Estimated Itemize Funds request:
Training: ________________ Travel: ________________
Parking: ________________ Gas/fuel: ________________ Mileage: ______
Meal/food: ________________ Other: ________________
The following information is required within 30 days of your event and required to get your funding

**Post HT Service to the Military Report form**

You can be simply e-mail this report and attachments to: info@htprofessionalassociation.com
IF you do not get a reply in 3 working days, please call the HTP office at: 210-497-5529
PHOTOS STRONGLY REQUESTED

Event/Project Name:
Current Date:
Date of Event:

Only ONE check will be sent

Event/Project Location:
Name of person receiving reimbursement:
Address (check sent here)
E-mail:
Phone:

Number of Volunteers Participating:
Number Receiving HT Service:

**Summary of Project Experience** (inspiration, frustrations, case studies) – this information CAN AND MAY BE USED for publication by HTP/HTPA/HTWF

Total Funds Requested: $ _________________
(Receipts must be included/attached for all reimbursements)
Itemize Funds request:
Training: ________________  Travel: ____________
Parking: ________________  Gas/fuel: ____________  Mileage: _______
Meal/food: _______________  Other: _______________

Signature of Applicant: