

# "Share the Spirit" Invitation to Apply



Instructions: Please print or type. An applicant is encouraged to seek support from her congregational unit and other sponsors as well as providing her own contributions to further the future success of this grant program.

## APPLICANT INFORMATION

Name: \_\_\_\_\_ Conference: \_\_\_\_\_  
 Address: \_\_\_\_\_ Church: \_\_\_\_\_  
 City: \_\_\_\_\_ State: FL ZIP: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
 E-mail (if available): \_\_\_\_\_



<u><b>Contribution Schedule</b></u>	
Participant	\$ _____
Congregational Unit	\$ _____
Other Sponsor	\$ _____
<b>Total Contribution Enclosed</b>	<b>\$ _____</b>
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Registration Fee	\$ _____
Room/Meals	\$ _____
Subtotal	\$ _____
Less Contribution Enclosed	\$ _____
<b>Total Grant Requested</b>	<b>\$ _____</b>

<u><b>Fees Include</b></u>
Registration Fee (participant)
Room/Meals (participant) (Motel Style Rm.)

Grants are awarded as funding permits and are awarded to applicants to supplement the cost of accommodations, meals, and registration fees. Previous grant recipients are eligible to apply.

**RECIPIENTS MUST NOTIFY THE REGISTRAR, DIANE CUMMINGS @  
407-421-4184, IF UNABLE TO ATTEND.**