



Member Groups
Chapter, Professional Practice Group (PPG) &
Special Interest Groups Initial Grant Form

Name of Chapter, PPG, or Special Interest Group

Name of President, Secretary, Treasurer or designate applying for grant

Address

Phone Fax PC

Email address

A constitution for the group has been submitted and approved by the SRNA

Yes No

Are you receiving other financial assistance?

Yes No Amount

Do you charge membership fees for members?

Yes No Amount

Name, email and phone of contact person for publication in SRNA Newsbulletin, newsletters or website:

Date Signature

Please complete this form and return it to the SRNA office.

You can fax, mail or email form to: Lesley Stronach, Executive Assistant

Fax: (306) 359-0257 or email: lstronach@srna.org

(Maximum support grant available \$300.00)

FOR SRNA USE ONLY

Assistance Granted Yes No Amount

Compliance with Policy 12.7; 12.7.1 Yes No

Date Signature

Code