



**BRANDYWINE VALLEY  
HEMOPHILIA FOUNDATION**  
Po Box 355, Unionville, PA 19375

Application Grant for funding received by applicant and paid by Foundation.

HFA2025 SYMPOSIUM-Navigating the Future, Together - San Diego March 27-30<sup>th</sup>.

The Foundation is offering an opportunity to fund attendance at HFA for 1 or 2 individuals, or a child and adult, whose lives are connected to the Hemophilia/Bleeding Disorder community, and either reside within our service area and/or are involved in our Foundation local functions.

Registration, travel, and hotel expenses for a maximum of \$2000 will be reimbursed, from receipts paid prior by the applicant to receiving this grant.

If your attendance at the conference is funded by the Foundation, you are agreeing to the following:

- 1-You must register for the conference.
- 2-You are required to participate fully in events of the conference and the activities by HFA once there. One of the Board Members will also be in attendance at the conference and will help you with any questions or concerns.
- 3-You agree to your permission to post photos at the event and your summary on our website and Facebook page to encourage others to take advantage of the same opportunity in the future.
- 4-You are required to submit a brief summary of your time spent at the educational event, including insights and information gained. The summary will be distributed to Foundation Board Members and must be submitted by May 1, 2025.

**Important Dates:**

**Application deadline- February 10, 2025**

**Foundation Notification of Application Selection- February 15, 2025**

**Summary from Grant Recipient- May 1, 2025**

PLEASE COMPLETE APPLICATION BELOW TO BE CONSIDERED

APPLICATION FOR \$2000 FUNDING FOR MARCH 2025 HFA

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Email Contact \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

HTC Treatment Center-or Hematologist Doctor Name and Location  
\_\_\_\_\_  
\_\_\_\_\_

Please submit the following on additional page(s):

- 1-Explain how you are involved with your bleeding community
- 2-Explain how you envision your life with your current disorder will be enriched by your attendance
- 3-Explain how you may share information received at conference with members of your bleeding community
- 4-List the dates you plan to attend HFA 2025
- 5-Provide the estimated costs you will ask the Foundation for reimbursement

Return this application to:

Gail Novak, Foundation President, via email @ [gvannicola@verizon.net](mailto:gvannicola@verizon.net)

Contact Gail @ email or phone (302)598-4632 with questions

**DEADLINE to submit application is February 10, 2025**