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**Application for Funding Assistance**

**AMP-Ed Up! 2021**

**National Amputee Conference**

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| **Personal Details** |
| **Name:**  |  |
| **Address:** |  |
| **Suburb:** |  **State: Postcode:**  |
| **Contact Number:** |  |
| **Email:** |  |
| **Date of Birth:** |  |
| **Attendance category:** | **I am applying to attend the conference as** *(please select applicable):***€** An interstate attendee – amputee**€** A Victorian-based attendee – amputee**€** Other*All applicants must currently be receiving the Disability Support Pension, Age Pension and/or hold a Healthcare Card to apply for Conference Funding Support.* |
| **Funding support***(please tick)* | **Did you receive funding support from Limbs 4 Life to attend AMP-ED Up in 2019?****€** Yes**€** No |
| **Reason for application:** | **Why you would like to attend the AMP-ED Up! Conference?** |
| **Information sharing:**  | **If your application is successful, will you be able to share the information from** **AMP-ED Up! Conference with other amputees and/or carers?** *(eg. articles in a newsletter or presentations to groups you are connected to)* |
| **Outcomes:** | **What do you believe the AMP-ED Up! Conference can offer the Australian amputee community.** |
| **Benefits:** | **How will attending the AMP-ED Up! Conference benefit you?** |
| **Feedback:** | **Are you willing to share your experience of AMP-ED Up! during and after the event?** *(eg. a quote, testimonial, comments)***€** Yes **€** No  |
| **Declaration** |
| Signed:  |
| Date: |
| I understand that the decision made by the Limbs 4 Life Conference Committee is final. **Please note:** ***Limbs 4 Life will not be responsible for additional costs in relation to accommodation (such as room service, meals, internet or telephone usage****).* |

**Please forward your completed application by 5.00pm, 30 June 2021 to:**

Limbs 4 Life INC.

Post: PO Box 282, Doncaster Heights VIC 3109, or

Email: info@limbs4life.org.au

**Late applications will not be accepted.**

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