

ATHA Region XI
Education Funds Application

Please complete the following application form (Page 1). The application must be approved if funds (\$200) are to be requested from ATHA Region 11. The Report (Page 2) will be due within 60 days of the event. This should be written with enough detail for use in our regional newsletter. (A minimum of 4-6 photos should be provided for newsletter or website use.) Please contact our Vice President, Pat Finlayson, if you have any questions.

Workshop Coordinator (must be a 2 year consecutive national and regional ATHA member):

Name: _____

Address: _____

Phone: _____ Email: _____

Education Fund check payable to? _____

Mailing address for Check: _____

Workshop Information:

Teacher: _____ Topic: _____

Date(s): _____

Location: _____

Total Estimated Cost: _____

Planned Student Count: _____ Planned Cost Per Student: _____

(For ATHA Board Completion)

Approved By: _____ Date: _____

Check # _____ Amount _____ Date: _____

ATHA Region XI - Education Funds Report

Workshop Details:

Teacher: _____

Topic: _____

Date(s): _____

Location: _____

Students who attended:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Details of Workshop (i.e., topics covered, what was taught, demonstrated, discussed, etc):