



REQUEST FORM

REVISED 10-2023

H&L Hope is a 501c(3) non-profit organization dedicated to providing education and financial support to further the martial arts experience for students with special medical needs.

**Check Out Our Facebook Page:
H & L Hope, A GTMA Foundation**

This form **MUST** be filled out **COMPLETELY** to be considered for a grant. A medical diagnosis **IS** required. Please be as **SPECIFIC** as possible. The more detailed the information on the form the better the chances of a grant. If requesting for tuition or private lessons the grant awarded will be for a quarter (3 months) Each quarter a new Request Form must be submitted.

Instructor's Name: _____

Instructor's Email: _____

School Name: _____

GTMA School Number _____

School Address: _____

School Phone Number: () - _____

Student Name: _____

GTMA Membership Number: _____

Student's Address: _____

DOB: / / Age: _____ M/F _____

Phone Number: Home: _____ Cell: _____

Medical Diagnosis—Type (Autism, Down Syndrome, etc.) Briefly describe and provide the diagnosis from the treating doctor:

Please describe in detail how this scholarship would benefit the student:

Please keep in mind, tuition and/or private lessons funding will be limited to a 3 month period.

Amount Requested: \$ _____

Signature of Parent or Student: _____

Date: _____

*** Applications are accepted only by email at
HLHope@gtmaonline.com. This OCTOBER 2023 version is the
only version that will be accepted for consideration.**