



Hand-N-Hand of Northeastern Wisconsin, Inc.

2950 Yonder Court, Green Bay, WI 54313

jgeiken@hnhnew.org

www.hnhnew.org

(920) 737-0477

Statewide Family Conference Scholarship Application

Parent/Guardian Name(s): _____

Home Address: _____

City: _____ Zip Code: _____

Telephone Number: _____ Email Address: _____

Child's name	Age
_____	_____
_____	_____
_____	_____
_____	_____

Hand-N-Hand of Northeastern Wisconsin, Inc. is committed to ensuring that ALL families can attend the Annual Statewide Family Conference for deaf, hard of hearing, deaf-blind, and deaf with additional disabilities. **Scholarships will be given solely to Hand-N-Hand families.** There are a limited amount of funds for family scholarships therefore we are encouraging families to approach other sources for additional funding as needed. Your contribution towards your Conference expenses will allow our scholarship funds to assist more families. Hand-N-Hand can offer \$150.00 to assist with registration fees. **No scholarship application postmarked after January 23, 2012 will be considered.**

Parent Signature _____ Date _____

**Return this application to: Jenny Geiken, Hand-N-Hand of Northeastern Wisconsin, Inc.,
2950 Yonder Court, Green Bay, WI 54313**

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