

American Turners Endowment Trust

ETF APPLICATION FORM

For an American Turner District or Society to receive any offering of the American Turners Endowment Trust, they MUST be in Good Standing with American Turners. This means that:

 the annual membership fees must be paid in full
 the National Directory information formerly referred to as the Statistical form must be submitted to the National Office. All offerings are available on a one (1) per calendar year basis

All Applications must be Received or Postmarked by <u>November 30th</u>

(B) 50/50 Physica (C) 50/50 Comput (D) Physical Educ Purpose: Applicant's Name (Society) Contact Person: Title/Position: Address:	ication Reimbursement al Education Equipment iter Reimbursement ication Payroll Compens	(G) (H) sation	William R. Meyer Honorary Scholarship First Aid / CPR / AED Edwin E. Colton Honorary Award Donation: Requested Amount\$
 (C) 50/50 Comput (D) Physical Educ Purpose: Applicant's Name (Society) Contact Person: Title/Position: Address: 	iter Reimbursement	(G) (H)	Edwin E. Colton Honorary Award Donation: Requested Amount\$
 (C) 50/50 Comput (D) Physical Educ Purpose: Applicant's Name (Society) Contact Person: Title/Position: Address: 	iter Reimbursement	(G) (H) sation	Donation: Requested Amount\$
(D) Physical Educ Purpose: Applicant's Name (Society) Contact Person: Title/Position: Address:	ication Payroll Compens	sation	
Purpose: Applicant's Name (Society) Contact Person: Title/Position: Address:			
Applicant's Name (Society) Contact Person: Title/Position: Address:			
Contact Person: Title/Position: Address:	۱.		
Title/Position:	J·		
Address:			
City			
City		State:	Zipcode:
Email Address:			
Phone: (Home)		(Cell)	
Comments:			

etfpresident@amturners.org and nationaloffice@amturners.org

For use ONLY in the US and by qualified individual Society, District or National Affiliates of the American Turners.