



APPLICATION FOR DOWN SYNDROME ENRICHMENT PROGRAMS

The purpose for which this Corporation is established shall be to carry out charitable and educational activities within the meaning of Section 501© (301) of the Internal Revenue Code of 1954, as amended, including:

1. The education and assistance of individuals with Down Syndrome so that those individuals may realize their full potential to live independently and to contribute to their communities and society at large.
2. The encouragement of a better understanding of Down Syndrome and support of the study, treatment and rehabilitation of individuals with disabilities.

In carrying out its corporate purpose, the corporation is authorized to engage in any and all activities to the fullest extent permitted by law.

PROGRAM

___ NH LEADERSHIP SERIES (Assists Family of Downs applicant to advocate for themselves)

___ UP REACH THERAPEUTIC RIDING

___ WELLNESS CENTER OR SUPERVISED PHYSICAL FITNESS CENTER

___ CAMPERSHIPS Camp Name _____

___ OTHER _____

Program Contact Name _____ Phone _____

Address _____

Applicant Name _____ Parent/Guardian _____

Address _____ Address _____

Address _____ Address _____

Phone _____

PLEASE ATTACH (1) PERSONAL AND (1) MEDICAL REFERENCE TO THIS APPLICATION

**** FUNDS DIRECTLY PAID TO PROGRAM PROVIDER ****

Mail to:

The Annie Forts UP Syndrome Fund, Inc.

Awards Committee

P.O. Box 838

Moultonboro, NH 03254